

# Psychologist Form 4 Instructions

The University of the State of New York  
THE STATE EDUCATION DEPARTMENT  
Office of the Professions  
Division of Professional Licensing Services  
www.op.nysed.gov

## Instructions for Completing Report of Professional Experience

**Note: Be sure to send a copy of these instructions to your supervising psychologist with Form 4.**

These instructions are intended to assist the qualified psychologist who intends to serve as the supervisor in providing a planned sequence of training that will further the professional development of the supervisee and, at the same time, will allow that same experience to meet the requirements for licensure. If there are any questions about these guidelines, Part 72 of the Commissioner's Regulations, or any other aspect of licensure in psychology, please feel free to contact the State Board for Psychology by e-mailing psychbd@mail.nysed.gov or by calling 518-474-3817, ext. 150.

**It is important to stress that the role of the supervisor is a significant and responsible one.** Although only one part of the evidence upon which the Board bases a decision to recommend licensure, it is obviously a significant factor in the process. To a large extent, the control and development of high standards of excellence in the practice of the profession by supervisees will be determined by the skill and diligence with which supervisors conduct their training and assessment of candidates. The supervision of an applicant for licensure is considered professional practice. Records of the dates and time of supervision and any other pertinent information should be maintained.

Part 72.2 of the Commissioner's Regulations describes the various facets of acceptable experience, including content, setting, duration, and nature of supervision. Both the applicant and the supervisor should read and be thoroughly familiar with those requirements. The form used to document experience (Form 4) requires specific information in order to permit the Department to evaluate the experience and determine its acceptability.

### General Instructions for completing Form 4

All experience submitted by applicants for admission to the licensure examination in psychology is attested to on Form 4.

Section I is completed by the applicant.

Section II must be completed by the supervisor and **returned directly** to the State Education Department in a sealed, official envelope. **The Form 4 will not be accepted if submitted by the applicant.**

### Instructions for completing Section II

#### Employment Supervisor

Supervision must be provided by a qualified psychologist who is responsible for and/or implements the design, coordination, integrity, and quality of the applicant's experience. Supervision must be provided by a psychologist licensed in the jurisdiction where the supervised experience occurs. For experience gained after January 1, 1988, supervisors must be retained by the setting in which the employment occurs.

For supervisors who are not licensed psychologists but who have a doctoral degree in psychology and who are supervising in exempt settings as defined in Article 153, Section 7605(1) of the New York State Education Law, a curriculum vitae must be submitted with Form 4. This information will be reviewed to determine the eligibility of that supervisor for supervision of experience used to meet the Experience Requirement of the Regulations of the Commissioner.

#### A. Type of Employment Setting

Check the appropriate box of the employment setting where the applicant worked to meet the experience requirement.

#### B. Applicant Employment Experience

Two years of full-time supervised experience, or the part-time equivalent thereof, must be documented by the supervisor. A year is defined as 1,750 hours.

Full time experience is from 35 to 45 hours weekly.

Part time experience is from 16 to 34 hours weekly.

#### 1. Applicant's title

Provide the formal title assigned to the applicant for the duration of the supervised experience. This must conform to Part 72.2 of the Regulations.

## 2. Intensity

Experience of less than 16 hours per week will not be eligible as licensure-qualifying experience. Full-time is considered 35 to 45 hours per week. No more than 45 hours will be counted toward meeting the 1,750 hours per year. Part-time experience is from 16 hours to 34 hours per week. A member of the faculty who teaches 9 semester hours at one institution will be considered full-time, 6 semester hours half-time; less than 6 semester hours per semester will not be counted.

## 3. Frequency and Nature of Supervision

Effective January 1, 1998, all applicants must have a minimum of two hours of supervision weekly for full-time experience and two hours bi-weekly for part-time experience. One of the two hours must be face-to-face supervision pertaining to services rendered; the second hour may be in face-to-face supervision, group supervision, seminars or workshops, or apprenticeship activities under the general oversight and direction of the supervisor.

Applicants who gained experience prior to January 1, 1988, are required to have had one hour of supervision weekly. Applicants who completed the doctoral requirement on or after October 1, 1992, must have one year of post-doctoral experience. This experience may begin when the university declares that the applicant has met all doctoral degree requirements, including dissertation requirements.

Supervisors must be retained by the entity where the supervised experience occurs and must be authorized to provide a full range of supervision, i.e., they should have access to any needed files and personnel, as well as clients or patients, to provide competent supervision.

## 4. Duration of Supervision

Acceptable experience must consist of continuous periods of not less than six months duration, except that experience in academic settings shall consist of continuous periods of not less than one semester. Summer sessions or interim sessions are not considered one semester.

## 5. Employment Duties

The experience shall consist of a planned sequence of supervised employment or engagement in appropriate psychology activities performed in accordance with the definition of the practice of psychology in Section 72.6 of the Regulations of the Commissioner for experience gained until August 31, 2003 or Section 7601-a of the State Education Law for experience gained on or after September 1, 2003 and satisfactory in quality, breadth, scope, and nature. Licensure-qualifying employment has the dual purpose of integrating knowledge and practical application under supervision and in-depth training prior to independent practice. Over time, experience should broaden and strengthen the competencies of the candidate. Work that consists solely or primarily of repetitive, routine or pre-professional activities may not provide the quality, nor the breadth and depth required for licensure-qualifying experience.

Beginning on January 1, 2002, all applicants for licensure in psychology must meet revised education requirements, including a year-long doctoral internship, practica (equivalent to an internship), field experience or applied research. Applicants who meet those requirements, may submit any form of experience found in Part 72.6 of the Regulations of the Commissioner gained until August 31, 2003 or Section 7601-a of the Education Law, gained on or after September 1, 2003 to meet the experience requirement.

Applicants may submit one year of teaching experience to meet one of the two years of experience, but such teaching experience must meet all of the requirements of Part 72.2 of the Regulations of the Commissioner.

### Supervising Psychologist's Attestation

Sign and date the attestation of work experience. Should you be unable to sign or have any reservations regarding this applicant's competence, professional conduct or moral character, please check the box and attach a letter of explanation addressed to the State Board for Psychology.

**A Reminder:** Licensed psychologists are subject to the provisions of Part 29 of the Rules of the Board of Regents governing Unprofessional Conduct as found in the New York Codes, Rules and Regulations (NYCRR). Supervisors are encouraged to review these rules before beginning supervision to ensure that supervisees integrate the Rules of Conduct into their practice.

**The Law and Regulations are available on our web site at [www.op.nysed.gov/prof/psych/](http://www.op.nysed.gov/prof/psych/)**



**Section II: To be Completed by the Supervisor** (type or print legibly in ink.)

**Instructions to the supervisor:**

- Read carefully the attached instruction sheet for completing this applicant's Report of Professional Experience.
- Complete Section II and provide the requested information below.
- If you disagree with any information presented by the applicant on this form, or wish to provide any other information for consideration by the Department, please attach a letter to this form. Please include the applicant's full name and social security number in your letter and indicate that he/she is an applicant for licensure as a psychologist in New York State.
- Sign the Supervising Psychologist's Attestation or if you do not sign the attestation, please explain in a letter attached to this form.
- **Do not return this form to the applicant.** Submit **all** pages of this form in a sealed official envelope to the Office of the Professions at the address at the end of the form. **This form will not be accepted if submitted by the applicant.**

Applicant name: \_\_\_\_\_  
(Page 1, item 3)

Supervising Psychologist's Name: \_\_\_\_\_

Title: \_\_\_\_\_ Degree: \_\_\_\_\_

Do you own or were you employed or engaged by the applicant's work setting?  Yes  No

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Are you a licensed psychologist?  Yes  No\*

If "yes": State: \_\_\_\_\_ License number: \_\_\_\_\_

Date of licensure: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
mo. day yr.

**\*if the exempt setting supervisor is not licensed, the supervisor's curriculum vitae must be submitted.**

**A. Type of Employment Setting** (check all that apply):

**Exempt Setting**

- State Agency
- Federal Agency
- Municipal Agency
- County Agency
- Chartered Elementary/Secondary School
- University/College

**Other Practice Setting**

- Private Hospital, Clinic, Health Related Facility, etc.
- Corporate/Industrial Setting
- Research Institute
- Regents Chartered Institute
- Employee in a Private Practice Setting
- Other (please specify): \_\_\_\_\_

**B. Applicant Employment Experience:**

1. **Applicant's Title:** \_\_\_\_\_

Note: If title, "Assistant Psychologist" was used for post-doctoral employment, indicate start and end dates of use of that title: beginning \_\_\_\_\_ / \_\_\_\_\_ and ending \_\_\_\_\_ / \_\_\_\_\_  
Month Year Month Year

2. **Intensity**

How many hours per week was the applicant employed or engaged in supervised work? \_\_\_\_\_ hrs/week

Full-time (35 - 45 hours)

Dates of work: From \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ to \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Total hours: \_\_\_\_\_  
mo. day yr. mo. day yr.

Part-time (16 - 34 hours)

Dates of work: From \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ to \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Total hours: \_\_\_\_\_  
mo. day yr. mo. day yr.

