



Psychological Association of the Philippines

**CERTIFICATION OF PSYCHOLOGY SPECIALISTS
RENEWAL APPLICATION FORM : _____ PSYCHOLOGY
(Area of Specialization))**

(The application period for RENEWAL is until April 15, 2015)

Cover Page

Name of applicant: (Please print in upper case/caps)

SURNAME/FAMILY NAME GIVEN NAME MIDDLE NAME

Contact information (all information is required):

Permanent Residence: _____

Work Address: _____

Phone/Fax: _____ Email address: _____

Submission information:

Date submitted: _____

Checklist of application documents for _____ (Area of Specialization):

- Cover Page
- Two sets of all the documents below, placed in a long folder with applicants printed name (SANTOS, M.A.) on the ear of the folder.
- Two folders placed inside one long brown envelope (regular or expanded, depending on the amount of documents submitted) with applicants printed name (SANTOS, M.A.) printed on the upper right hand corner of the front side of the envelope, and the area of specialization applied for printed on the upper left hand side.

Criteria: In order to renew a certification, a psychologist needs to fulfill a minimum of 60 points within 3 years that comes from at least 2 areas:

Venue	Points	Evidence
TRAINING & EDUCATION		

Training Seminars / Workshops attendance in area of specialization (*offered by PAP accredited provider)	• -----	Certificate, program content
Conference attendance (not presentation; *sponsored by PAP accredited provider)	• -----	Certificate of attendance, conference program
Graduate School (*in a PAP accredited school)	• -----	Transcript/True Copy of Grades
Venue	Points	Evidence
RESEARCH & PUBLICATIONS		
Publications in area of specialization	-----	Copy of manuscript, book, book chapter, or article
Research Paper Presentation (Oral or Poster) in area of specialization	Conference presentation International: ----- Local: ----- Institutional: -----	Certification/conference program & soft copy of presentation
INNOVATIONS IN PRACTICE		
Training /Educational Programs in area of specialization	• -----	Syllabus, course design & materials, certification from graduate school regarding status of graduate course
Implementation of New Intervention in area of specialization	-----	Project Report/ Documentation with evaluation
Instructional Materials	-----	Test manual Book
PAP involvement	• Contributions to PAP: -----	Endorsements by supervisor

Printed Name and Signature of Applicant

The PAP will accredit schools and training providers and activities that may be used for renewal of certification.

**For first batch of certified psychology specialists, activities from July 2009 to Feb 2013 may be used for continuing professional education credits.

*** For second batch of certified psychology specialists, activities from July 2010 to Feb 2014 may be used for continuing professional education credits.

****For subsequent batches, activities from June of the year of certification to February three years after will be credited.

To be filled up by PAP:

Payment made: Cash Check Others, please specify details: _____

Submission Record # _____ OR # _____

Received by:

Printed name and signature