

KENTUCKY BOARD OF EXAMINERS OF PSYCHOLOGY

P.O. Box 1360, Frankfort, KY 40602 (Regular Mail) 500 Mero St., 2 SC 32, Frankfort, KY 40601 (Courier/Special Delivery) Phone: (502) 782-8812 ~ Fax: (502) 564-4818 ~ http://psy.ky.gov

CONTINUING EDUCATION SPONSORSHIP APPLICATION

This application was originally formulated by the American Psychological Association, and subsequently modified by the Kentucky Board of Examiners of Psychology.

Sponsor Approval System Fee as of February, 2017					
Application Fee (must accompany application):	oval Oyolol	\$250.00 (Initial)	y, 2011		
Renewal Fee:		\$150.00			
THIS APPLICATION MUST BE ACC	OMPANIE	RV THE EEE REE	DE IT WILL BE	REVIEWED	
THIS AT LIGATION MOOT BE ACC	OMI ANIEL	OBT THE TEE BET	JILL II WILL DE	KLVILVLD	
Organization		Contact Person			
Mailing Address: Street	City		State	Zip Code	
, and the second				•	
Dhana		Fax			
Phone		Гах			
Email		Web Address			
1. TYPE OF ORGANIZATION	ENERAL IN	IFORMATION			
Please indicate the following (check all that app	ly):				
☐ Univ/College: Psychology Dept.	,	☐ Professional So	ciety/Association		
☐ Univ/College: Other Division	☐ Hospital/Medical School				
□ Private Educational Organization□ Professional School of Psychology		☐ Mental Health C			
☐ Professional School of Psychology		☐ Government Age☐ Other (specify):			
2. MAJOR GOALS AND FUNCTIONS OF YOUR ORGANIZATION					
What are the major goals and functions of your organization? (This question refers to the overall, or parent					
organization. If your organization's only function is to offer continuing education, please indicate so in response to this					
question, and provide a more detailed description of your organization's purpose in response to Question A.1.).					
o Approval Hiotopy					
3. APPROVAL HISTORY Have your previously applied to the Kentucky E	Roard of Eva	uminars of Develop	w American Dev	chological Association	
or Kentucky Psychological Association for appro					
□ No	·	-			
☐ Yes If yes, date of application (m/yr): _		Decision:			
4. TARGETED AUDIENCE					
Persons licensed by the Kentucky Board of E	xaminers o	f Psychology as reg	julated by KRS 3	319, and the following	
indicated participants:		D.E.L. :			
□ Physicians□ Psychiatrists		☐ Educators☐ Graduate Stude	nts		
☐ Social Workers		☐ Undergraduate Students			
□ Nurses					

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STANDARD A: GOALS PRINCIPLE Continuing education in psychology builds upon a completed post-bachelor program of study and/or practice in psychology. Continuing education (CE) in psychology is an ongoing process consisting of formal learning activities that (1) are relevant to psychological practice, education and science, (2) enable credential holders to keep pace with emerging issues and technologies, (3) allow credential holders to maintain, develop, and increase competencies in order to improve services to the public and enhance contributions to the profession, and (4) promote best practices with regard to ethics and risk management. **CRITERION** Sponsors must have a statement of goals for their CE program that reflects this aforementioned Principle. Please state the immediate and long-term goals of your continuing education program.

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STANDARD B: PROGRAM MANAGEMENT

PRINCIPLE

Effective program management is essential for maintaining the highest quality in continuing education programs for psychologists.

CRITERIA

- Sponsors must include the direct input of psychologists in all phases of the decision-making and programplanning process for the activities offered to credential holders for CE credit.
- Sponsors must have a clearly designated program administrator or designee who is responsible for ensuring that the organization meets the Standards described in this document.
- Sponsors must ensure the security of tests and proprietary information, and the confidentiality of individuals and organizations, as well as anonymity of a person-specific consumer or consumers.
- Sponsors must have written procedures for addressing participant complaints in a reasonable, ethical, and timely fashion.
- Sponsors must select instructors and develop program materials that respect cultural, individual, and role differences, including those based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, and socioeconomic status.
- Sponsors must make all CE programs accessible to individuals with disabilities, according to the requirements of the Americans with Disabilities Act.
- Sponsors must adhere to all Standards in this document in all aspects of CE programs offered under the auspices of approval.

1. Provide below a list of names, highest degree earned and employment setting of credential holders, mental healthcare professionals and/or "qualified professionals" responsible for program planning, and describe the contribution of each individual to the planning process.

NAME	DEGREE	EMPLOYMENT SETTING	ROLE IN PROGRAM PLANNING
	•	ommittee or advisory group,	please describe how the committee
functions as a whole and how ofte	n it meets.		
2. Who is the administrator or des	signee of your CE	program? Describe how this	individual ensures that the Standards
and Criteria and Policies and Prod			

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3. Describe your method for ensuring the security of tests and proprietary information, and the individuals and organizations as well as anonymity of a person-specific consumer or consumers.	confidentiality of
	·
4. Describe your procedures for dealing with participant complaints. Please attach a copy of the written you would provide to participants upon their written request.	en procedures that
5. Describe the policies and procedures your organization has developed to guard against discrimina selecting participants and faculty, and developing content for your CE programs.	tion in staff hiring,
6. Describe your method for ensuring that your programs are accessible to participants with disabiliti	oc (o.g. physical
visual, and/or hearing impairments).	es (e.g., priysical,
7. Do you collaborate with other organizations to provide continuing education programs for credential holders?	☐ Yes ☐ No
If yes, do you maintain full responsibility for the administration of these programs?	☐ Yes ☐ No
If you collaborate with other organizations to offer CE programs for credential holders, provide an attachment that lists the names of the organization with whom you collaborate	
over the past year, the program titles, and program dates. Corresponding promotional	
materials for all listed programs must be provided in Section G. Promotion and	
Advertising of Programs.	
REQUIRED ATTACHMENTS FOR SECTION B:	
□ Curriculum Vitas	
☐ Written procedures for dealing with participant complaints	
☐ List of collaborating organizations, program titles and dates (if applicable)	

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Sample Grievance Procedure				
GRIEVANCE PROCEDURE				
is fully committed to conducting all activities in strict conformance with (Name of Agency)				
201 Kentucky Administrative Regulation 26: 130 will comply with all legal and ethical responsibilities to be non-discriminatory in promotional activities, program content and in the treatment of program participants. The monitoring and assessment of compliance with these standards will be the responsibility of the Continuing Education Committee Chair and the members of the Continuing Education Committee, as well as the Kentucky Board of Examiners of Psychology.				
While goes to great lengths to assure fair treatment for all participants and attempts to anticipate problems, there will be occasional issues which come to the attention of the program staff which require intervention and/or action on behalf of This procedural description serves as a guideline for handling such grievances.				
When a participant, either orally or in written format, files a grievance and expects action on the complaint, the following actions will be taken.				
1. If the grievance concerns a speaker, the content presented by the speaker, or the style of presentation, the individual filing the grievance will be asked to put his/her comments in written format. The CE Chair will then pass on the comments to the speaker, assuring the confidentiality of the grieved individual.				
2. If the grievance concerns a workshop offering, it's content, level of presentation, or the facilities in which the workshop was offered, the convention chair will mediate and will be the final arbitrator. If the participant requests action, the convention chair will:				
a. attempt to move the participant to another workshop or				
b. provide a credit for a subsequent year's workshop or				
c. provide a partial or full refund of the workshop fee.				
Actions 2b and 2c will require a written note, documenting the grievance, for record keeping purposes. The note need not be signed by the grieved individual.				

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STANDARD C: EDUCATIONAL PLANNING AND INSTRUCTIONAL METHODS

PRINCIPLE

Successful continuing education in psychology requires: (1) careful educational planning that results in a clear statement of educational objectives; (2) the selection of appropriate instructional methods to achieve those objectives; and (3) the selection of instructional personnel, that being a "qualified professional" with demonstrated expertise in the program content.

CRITERIA

- Sponsors must develop educational objectives that clearly describe what participants are expected to learn.
- Sponsors must select instructors with expertise in the program content and who are competent to teach this program content at a level that builds upon a completed post-bachelor degree in psychology. Sponsorships should have previously provided at least two learning activities which yielded "satisfactory" ratings as based upon participant-based program evaluations gathered by feedback reports and measures.
- 1. For your two most recent programs, complete the chart below that lists the activity titles, number of credits awarded, instructional method, learning objectives, and instructor name and degree(s). A <u>full</u> CV must be provided for each instructor. If you are a new applicant and have not yet offered any CE activities, you must provide this information for programs you plan to offer in the future. If one or more of the activities listed is a multi-session program for which credit is earned on a session-by-session basis, you must list individual session names. Do not list the overall conference.

Activity Title	Number of Credits Awarded
Instructional Method*	Instructor(s)
Learning Objectives	
*For the instructional method, indicate the delivery metho ROM, etc.)	d used for the activity (e.g., workshop, seminar, book, CD-
Activity Title	Number of Credits Awarded
Instructional Method*	Instructor(s)
Learning Objectives	
	d used for the activity (e.g., workshop, seminar, book, CD-
ROM, etc.)	

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QUESTIONS 2 AND 3 ARE FOR HOME STUDY PROVIDERS ONLY	
2. Do you offer home study/distance-learning programs? If you answered yes, check the delivery method(s) used: Publication (book, magazine, journal article, etc.) Video Online CD-ROM Other (specify):	□ Yes □ No
3. List below the name and degree of the individual(s) responsible for home study program preparation. A full CV must be included as an attachment for each individual.	development and test
REQUIRED ATTACHMENTS FOR SECTION C:	
☐ Full CVs of instructors (biographical summaries are not sufficient)	
☐ Full CV for individual(s) responsible for home study program and test preparation (if applicable).

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STANDARD D: CURRICULUM CONTENT

PRINCIPLE

The content of continuing education is the crucial component of programs intended to maintain, develop, and increase conceptual as well as applied and operational competencies that are relevant to psychological practice, education, and science. CE programs may include content related to well-established psychological principles, or may be based on content that extends current theory, method, or practice. CE programs may provide information related to best practices (e.g., outcome-based measures), ethical, legal, statutory, or regulatory policies, guidelines, and standards that impact psychology.

CRITERIA

- Sponsors must be prepared to demonstrate that information and programs presented are based on a methodological, theoretical, research, or practice knowledge base. This requirement must be met by at least one of the following:
 - Program content has obtained credibility, as demonstrated by the involvement of the broader psychological practice, education, and science communities in studying or applying the findings, procedures, practices, or theoretical concepts;
 - Program content has been studied according to established procedures of scientific scrutiny that can be reasonably relied upon;
 - Program content has peer reviewed, published support beyond those publications and other types of communications devoted primarily to the promotion of the approach;
 - Program content is related to best practices, ethical, legal, statutory or regulatory policies, guidelines, and standards that impact psychology.
 - Program content should also provide presentation of new, experimental, and/or innovative training and education.
- Sponsors are required to ensure that instructors, during each CE presentation, include statements that describe
 the accuracy, reliability and utility of the materials presented, the basis of such statements, the limitations of the
 content being taught, and the severe and the most common risks.
- Sponsors must offer program content that builds upon the foundation of a completed post-bachelor degree in psychology.
- Sponsors must be prepared to demonstrate that content is relevant to psychological practice, education, or science.
- Sponsors must clearly describe any commercial support for the CE program, presentation, or instructor to program participants at the time the CE program begins. Any other relationship that could be reasonably construed as a conflict of interest also must be disclosed.

I. For your two most recent programs (as listed in response to Question C.1 of this application), indicate which asport Criterion 1 your programs meet (check all that apply):	ects
☐ Program content has obtained credibility, as demonstrated by the involvement of the broader psychologic practice, education, and science communities in studying or applying the findings, procedures, practices, or theoretical concepts.	al
☐ Program content has been studied according to established procedures of scientific scrutiny that can be reasonably relied upon.	
☐ Program content has peer reviewed, published support beyond those publications and other types of communications devoted primarily to the promotion of the approach.	
Program content is related to ethical, legal, statutory or regulatory policies, guidelines, and standards that impact psychology.	İ

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For each item checked, describe how your program meets that criterion. Where applicable, you must also provide citations.
2. Describe how you will ensure that instructors include statements that describe the accuracy, reliability, utility of the materials presented, the basis of such statements, the limitations of the content being taught, and the severe and the most common risks.
3. Do you (organization and/or instructor) receive commercial support, or have any other relationship that could be reasonably construed as a conflict of interest? \square Yes \square No
If yes, describe how this is made evident to program participants.

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STANDARD E: PROGRAM EVALUATION

PRINCIPLE

Evaluation of CE programs is for the purpose of improving future programs.

CRITERIA

- Sponsors must obtain the CE participants' evaluation as to how well each educational objective was achieved.
- Sponsors must assess the participants' satisfaction, using a written evaluation form, with the overall program.
- Sponsors must ensure that there is a method in place to assess what the participants have learned from the program.
- Sponsors must use the results of the abovementioned evaluation processes to improve and plan future programs.

1. Describe your method for assessing participant satisfaction with the program. You must attach a sample of your written evaluation form.
2. Describe your method for assessing the level of learning achieved by participants. Providers of home study programs must attach sample tests of achieved learning for the four most recent activities. For each sample test provided, you must indicate the program title and number of CE credits offered. For new applicants, you must attach sample post-tests for programs you plan to offer in the future.

2. Describe how evaluation feedback is used to improve and plan future programs. For all programs offered in the past
3. Describe how evaluation feedback is used to improve and plan future programs. For all programs offered in the past year, you must provide a quantitative summary of the evaluations.
REQUIRED ATTACHMENTS FOR SECTION E:
□ Satisfaction evaluation form.
☐ Test of achieved learning (post-test) — required for home study providers. Must indicate activity title and number of credits awarded.
☐ Evaluation summaries for all programs offered in the past year.

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Sample Evaluation Form #1					
Topic Title:					
Participant's Name (optional):					
EVALUATION TOOL					
We appreciate your help in evaluating this program. Please indicate your rebelow by circling the appropriate number, using a scale of 1 (low) through form:					
OBJECTIVES					
This program met the stated objectives of: 1. Identify three types of neurological complications often found after traumatic brain injury.	1	2	3	4	5
 Identify three types of other traumatic complications often found after traumatic brain injury. 	1	2	3	4	5
3. List two types of medications to be avoided after traumatic brain injury.	1	2	3	4	5
SPEAKERS (generally) 1. Knowledgeable in content areas	1	2	3	4	5
2. Content consistent with objectives	1	2	3	4	5
3. Clarified content in response to questions	1	2	3	4	5
CONTENT 1. Appropriate for intended audience	1	2	3	4	5
Consistent with stated objectives	1	2	3	4	5
TEACHING METHODS 1. Visual aids, handouts, and oral presentations clarified content	1	2	3	4	5
	·				
Teaching methods were appropriate for subject matter	1	2	3	4	5
FACULTY 1. Knowledgeable in content area	1	2	3	4	5
2. Content consistent with objectives	1	2	3	4	5
3. Clarified content in response to questions	1	2	3	4	5
RELEVANCY 1. Information could be applied to practice	1	2	3	4	5
2. Information could contribute to achieving personal, professional goals	1	2	3	4	5
FACILITY 1. Was adequate and appropriate for session	1	2	3	4	5
2. Was comfortable and provided adequate space	1	2	3	4	5
This program enhanced my professional expertise	□Substantially	□Sc	omev	vhat	□Not at all
I would recommend this program to others	□Yes		lo		□Not sure

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COMMENTS/PROGRAM IN	MPROVEMENTS:			
I would like (name of Ker workshops on the following		ners of Psychology-ap	pproved sponsor) to pi	rovide seminars or
IN GENERAL				
Do you prefer:	□half-day seminars	□full-day seminars	□multi-day seminars	
Do you prefer seminars in:	□hotels	□hospitals	□no preference	
How much time do you nee	d to respond to a progra □less than 1 month	m announcement? □4 to 6 weeks	□more than 6 weeks	S
How did you hear about this	s program? □brochure	□supervisor	□colleague	□other
How far did you travel to att	end this program? □0-25 miles	□25-50 miles	□50-100 miles	□over 100 miles
		THANK YOU		

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Sample Evaluation Form #2

WORKSHOP EVALUATION A. Course Design (circle the number to indicate your of course design)			ent/disa	greement		-
4. The management content meet on management	Strongly ag	gree	0	0		Strongly disagree
1. The program content met my needs2. Length of the course was adequate3. What did you like about the course?	Ź		2 2	3 3	4 4	5 5
4. What specific things did you like least about the cour	rse?					
5. If the course was repeated, what should be left out o	r changed?					
B. Course objectives (circle the number to indicate which course objectives were met)	your level o	_	ment/di	sagreemer		e degree to Strongly disagree
Understanding of prevalence and diversity of	Strongly a		2	3	4	5
mental health problems among the elderly			_	5	7	3
2. Skills development in the area of and group therapy			2	3	4	5
3. Increases knowledge in the area and of			2	3	4	5
documentation						
4. Awareness of available psychological and	•		2	3	4	5
assessment tools						
5. Information on expected standard and for clinical	•		2	3	4	5
contributions			_		_	_
6. Knowledgeable of responsibilities of and area and	•		2	3	4	5
district managers	,		2	2	4	E
Knowledge of credentialing and scoring Increases knowledge of policy issues	,		2 2	3 3	4 4	5 5
6. Increases knowledge of policy issues			2	3	4	5
C. Evaluation of each faculty member in stated area	1					
and the same of th	Strongly a	gree			;	Strongly disagree
1. Content was presented in an organized manner	3,5	ĺ	2	3	4	5
2. Content was presented clearly and effectively	•		2	3	4	5
3. Was responsive to questions/comments	•		2	3	4	5
4. Teaching aids/audiovisuals were used effectively	•		2	3	4	5
5. Teaching style was effective	•		2	3	4	5
6. Content met stated objectives	•		2	3	4	5
7. Content presented was applicable to my practice	•		2	3	4	5
D. As a result of attending this course, I see the val	ue to me in	the follo	owing w	ays (chec	k all that	apply):
☐ I gained one of more specific ideas that I can implem☐ I learned a new approach to my practice☐ It may help me do a better job☐ I do not see the impact of this course on my job☐ Other	nent in my ar	ea of pra	actice			

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E. By attending this course, I believe (check	k all that apply):					
☐ I was able to update my skills ☐ I acquired new and/or advanced skills ☐ I have better knowledge upon which to base ☐ I am reconsidering my views toward the top ☐ The topic presented was appropriate, but I a ☐ Other	ic(s) presented			ng		
F. Facilities/Arrangements (circle the approitem is not applicable to you)	priate number to in	dicate you	ur level of	satisfactio	on or circle	e NA if the
item is not applicable to you,	Unsatisfac	ctorv		Sati	isfactory	
1. Lodging	1	2	3	4	5	NA
2. Food services	1	2	3	4	5	NA
3. Meeting rooms and facilities	1	2	3	4	5	NA
4. Restrooms	1	2	3	4	5	NA
5. Day of week	1	2	3	4	5	NA
6. Time of day	1	2	3	4	5	NA
7. Location	1	2	3	4	5	NA
Comments:						
Overall, I would rate this workshop as:						
,						
□ Excellent □ Good □ Average □ Poor						
Other learning needs (list any other topics you	would be interested	in for the f	uture):			

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STANDARD F: STANDARDS FOR AWARDING CREDIT

PRINCIPLE

The awarding of CE credit is based on participation in learning activities offered in accordance with the Laws and Regulations outlined in 201 KAR 26:175 [Continuing Education] as well as these Standards described in this document.

CRITERIA

- Sponsors must award CE credit for credential holders on the basis of one credit per one hour of instructional time.
- Sponsors must provide documentation to each participant that includes the Kentucky Board of Examiners of Psychology approval statement, the name and date of the activity, the number of CE credits earned, and a signature or other verification from the sponsoring organization.
- Sponsors must be able to verify the awarding of CE credit to participants and provide this verification to individuals who request it for at least three years after completion of the activity.
- 1. For <u>all</u> activities offered in the past year, complete the following chart that lists the activity title, program length (in hours), the number of credits awarded, and the number of psychologist and non-psychologist attendees. If you have not offered any programs in the past year, provide this information for your most recent activities. If you are a new applicant and have not yet offered any programs, provide this information for programs you plan to offer in the future. **List only those programs that were offered to credential holders for credit.**

If you offer any multi-session programs (e.g., conventions, conferences) for which credit is earned on a session-by-session basis, you must list all the individual sessions that were available for credit. Do not list the overall conference.

SUMMARY DATA FOR ACTIVITIES OFFERED IN THE PAST YEAR

	Number of I		sychologists	
-	Program Length	# of CE Credits		sychologists Non- Psychologists
Title of Activity	Length	CE Credits	Psychologists	Psychologists

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Total Activities:	Total Psychologists:		Total N	Total Non-Psychologists:		
Attach a copy of your documentation of attendance Describe your attendance policy and your method for monitoring attendance						
 4. Affirm that you agree to keep records of credit awarded to participants for a three-year period by check below: ☐ Yes, I agree to keep records of credit awarded to participants for a three-year period 						

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QUESTIONS 5, 6, AND 7 ARE FOR HOME STUDY PROVIDERS ONLY				
5. Describe in detail the process used to determine the number of credits awarded. If you have various program				
delivery methods (e.g., publication and on-line), you must describe the process used for each delivery method.				
6. What are the criteria that participants must meet in order to receive credit?				
6a. For programs that use more subjective assessment measures to determine passing (e.g., essays, posts to an				
electronic bulletin board, journaling), describe your procedures for grading this type of material.				
7. Describe your method for verifying that the person being awarded the credit is the individual who completed the program.				
REQUIRED ATTACHMENTS FOR SECTION F:				
☐ List of activities offered in the past year, program length, and credits.				
□ Documentation of attendance				

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Sample Documentation of Attendance				
Date				
Date -				
To whom it may concern:				
This is to certify that (participant's name) has attended, in its entirety, the following continuing education activity I sponsored by (the Kentucky Board of Examiners of Psychology-approved provider's name):				
Title/Date of Activity				
CE Hours/Credits				
Sincerely,				
Name of Presenter/Sponsoring Organization				
(Name of organization) is approved by the Kentucky Psychological Association and/or Kentucky Board of Examiners of Psychology to offer continuing education for psychologists. (Name of organization) maintains responsibility for this program and its content.				

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STANDARD G: PROMOTION AND ADVERTISING OF PROGRAMS

PRINCIPLE

CE promotional materials must contain accurate and complete information for potential program participants.

CRITERIA

- Sponsors must clearly indicate how potential participants may obtain the following information prior to enrolling in a CE program:
 - a. Educational objectives;
 - b. A description of the target audience and the instructional level of the activity (introductory, intermediate, or advanced);
 - c. Schedule:
 - d. Cost, including all fees and the refund/cancellation policy;
 - e. Instructor credentials, including relevant professional degree and discipline, current professional position, and expertise in program content;
 - f. The number of CE credits offered for each activity;
 - g. A clear indication of any activities within a program that are <u>not</u> offered for CE credit.
- Sponsors must make clearly evident to all potential participants, prior to registration, any known commercial support for CE programs or instructors. Any other relationships that could be reasonably construed as a conflict of interest also must be disclosed.
- Sponsors must assure that when referring to Kentucky Board of Examiners of Psychology [KBEP] approval, the
 correct statement is used in all promotional materials such as ads, brochures, and announcements When referring
 to KBEP approval, the following statement <u>must</u> be used:

"(Organization name) is approved by the KBEP to sponsor continuing education for credential holders. (Organization name) maintains responsibility for this program and its content."

1. Provide the promotional material/announcement for each CE activity offered in the past year. If you have not offered any programs in the past year, provide brochures from your most recent activity. If you are a new applicant and have not yet offered any CE programs, attach sample promotional materials for programs you intend to offer in the future.

2. If you receive commercial support for your programs, describe how you make this known to potential participants.

REQUIRED ATTACHMENTS FOR SECTION G:

☐ Promotional materials/announcements	for all programs	offered in the pas	t year.	If new applicant,	provide	sample
promotional materials for future programs.						

AC	GREEMENT
	e kept confidential. I also certify that the information provided
herein is accurate, and if approved, agree to abide by Statutes and Administrative Regulations related to Psychiatric Psychological Statutes and Administrative Regulations related to Psychiatric Psy	y the criteria and procedures set forth in the Kentucky Revised chology.
Signature:	Date:
CE Program Director	

Thank you for completing this application. Please send the application to:

Kentucky Board of Examiners of Psychology P.O. Box 1360 Frankfort, KY 40602

THIS APPLICATION WILL NOT BE REVIEWED UNLESS ACCOMPANIED BY THE APPROPRIATE FEE.

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