



MINNESOTA BOARD OF PSYCHOLOGY
(612) 617-2230; Fax (612) 617-2240
MN Relay Service 1(800) 627-3529
www.psychologyboard.state.mn.us
Email: psychology.board@state.mn.us

ABOUT THE PROFESSIONAL RESPONSIBILITY EXAMINATION (PRE) **THE STATE LICENSURE EXAMINATION**

The Professional Responsibility Examination (PRE) covers the Statutes and Rules of the Board of Psychology and other regulations related to the practice of psychology in Minnesota, which are featured in the Minnesota Board of Psychology, Psychology Practice Act Booklet. Contact the Board office if you do not have a Psychology Practice Act Booklet. According to Minnesota Rule 7200.4500, the Ethical Principles of Psychologists and Code of Conduct, published by the American Psychological Association (APA) are incorporated by reference into the Minnesota Rules of Conduct and are available from APA. Please contact APA at (202) 336-5500 to obtain a copy. The PRE also covers the APA Ethical Principles of Psychologists and Code of Conduct.

The Minnesota Psychology Practice Act book is composed of two parts: Pages 30 through 48 – Minnesota Laws; and pages 2 through 29 – Minnesota Rules. The booklet contains both parts of the Psychology Practice Act as well as other regulations related to the practice of psychology in Minnesota on pages 50 through 161. *Please note page numbers are for reference only, refer to the Minnesota Psychology Practice Act Book or visit www.psychologyboard.state.mn.us/statutes for a complete listing of all rules and statutes.*

The PRE examination is given at the Board office. It is expected that most applicants should be able to complete the examination in approximately 1½ to 2 hours.

Your confirmation letter will give the date on which you may take the PRE. If you are unavailable for that administration, you may contact the Board office to reschedule. There is limited seating at each session.

The examination consists of 60 multiple-choice questions. A passing score* is 70% of the questions answered correctly. An applicant not obtaining a passing score will be permitted to repeat the examination after submitting another application along with the non-refundable fee. Applicants will be notified of the results by mail as soon as the examinations are scored. **No examination results will be given out over the telephone.**

You are eligible to take this examination once the Board notifies you that your education meets the educational requirements for licensure. If you have also submitted your application for licensure, your supervisor and endorser verification forms do not have to be in the Board office before you can take this examination.

Individuals with a disability who need a reasonable accommodation in order to participate in the PRE should contact the Board office at (612) 617-2230 or through the Minnesota Relay Service at 1(800) 627-3529, three weeks prior to the examination.

Please do not hesitate to contact the Board office, if you have any questions.

*Some applicants may have a Board document requiring a higher passing score.

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FEE
\$150.00 certified check,
cashier's check or money
order made payable to:
MN Board of Psychology
**(personal checks will NOT
be accepted)**

**IMPORTANT INFORMATION FOR PROFESSIONAL RESPONSIBILITY EXAMINATION (PRE)
APPLICANTS**
THE STATE LICENSURE EXAMINATION

PLEASE READ THIS INFORMATION BEFORE COMPLETING THE ENCLOSED APPLICATION.

ABOUT YOUR TRANSCRIPT

If this is the first time you have applied for a licensure examination in Minnesota, be sure to request that your official graduate transcript(s) be sent directly from your school to the Board office. The transcript can not be used in this process unless it verifies that your school has conferred your degree, upon which this application is based. This means that all coursework must be documented as being successfully completed, all requirements for the degree must be documented as completed, and the school must have the degree posted on the transcript with the date it was awarded. If this Board, (based on the same degree), has admitted you to the EPPP or PRE before, you need not resubmit transcripts.

Applicants who now have been conferred a doctoral degree, but were previously admitted to the EPPP or PRE by this Board based on a master's degree or the equivalent of a master's degree in a doctoral program, will need to have the doctoral transcript sent directly to the Board from your school.

**ABOUT QUESTION # 12 IF YOUR DOCTORAL DEGREE PROGRAM WAS APA-ACCREDITED WHEN YOU
EARNED THE DEGREE**

If you earned your doctoral degree in psychology from a regionally accredited educational institution and your degree program was APA-accredited at the time your degree was earned, do not complete question #12 on the PRE application. Instead, have APA send directly to the Board of Psychology office, acknowledgement that your program was APA-accredited and certification of the date your program was accredited by APA; OR have the degree program director or equivalent at your school send a letter directly to the Board of Psychology office certifying that your degree program was APA-accredited at the time of your graduation. The letter from APA or from your school must be on the organization's official letterhead with the signature of the official making the certification.

**ABOUT SUPPORTING DOCUMENTATION IF YOUR DEGREE PROGRAM WAS NOT APA-ACCREDITED WHEN
YOU EARNED THE DEGREE**

If the degree upon which this application is based was granted after June 30, 1991, but the degree program was not APA-accredited at the time you earned the degree, complete Question #12 and follow these instructions:

If you received your graduate degree from an educational institution located in this state, it is possible that the institution has provided to the Minnesota Board of Psychology information about the psychology graduate degree programs offered at the institution. A representative of your degree program can tell you if this is the case, and can let you know which of the courses you took fits into each of the core or applied course areas shown on the application under item 12. If your school has already given the Board that information, supporting documentation for your coursework is likely to be minimal or unnecessary. This may also apply to your supervised, pre-degree practical field or laboratory experience (internship), especially if it is posted on your transcript.

ABOUT SUPPORTING DOCUMENTATION IF YOUR DEGREE PROGRAM WAS NOT APA-ACCREDITED WHEN YOU EARNED THE DEGREE (Cond't)

If your practical field or laboratory experience does not appear on your transcript, have your internship director or a school official with authority to verify your placements, write a letter and send it directly to the Board. The letter must certify that you successfully completed the required number of hours of practical field or laboratory experience and must give the dates of the placements. You would then have to submit a variance request (See section About Waivers and Variances), asking the Board to vary the requirement that practical field or laboratory experience appear on your transcript, and instead accept the letter from the school as verification of your pre-degree training.

If you received your graduate degree from an educational institution located outside of Minnesota, or if the Application Review Committee is unfamiliar with your course offerings, you may be asked to provide supporting documentation for courses you list as meeting core or applied course requirements under question 12. This is because the Committee probably has not had prior communication with your school, and is unable to tell from the course title how much of the course, if any, represents the three/six graduate quarter credits. If this is the case, the Committee may need to see syllabi, reading lists, class notes, or other similar documentation of a course's actual content. Therefore, if you are able to send this additional documentation with your application, it may help the Committee formulate its recommendation to the Board about your application sooner. You may document your pre-degree practical field and laboratory experience as described in the previous paragraph, if it is not posted on your transcript.

Board staff conducts an initial review of your application when it is received in the office. That review is confined to making sure that the application includes entries in every appropriate section and that the information you submitted about your education is consistent with licensure requirements. The next review is conducted by the Board's Application Review Committee, whose job it is to evaluate the information you submitted on the application to see whether it demonstrates compliance with the educational requirements for licensure in Minnesota's Psychology Practice Act. The Committee considers completed applications at its regularly scheduled meetings, which are held ten days before each meeting of the full Board.

In reviewing your application, the Committee considers any documentation you submit. Using the information you provide, the Committee determines whether any coursework you are required to list represents the equivalent of three graduate quarter credits in each of seven core course areas, and six graduate quarter credits in each of two applied course areas. Acting on the documentation it receives, the Committee recommends admittance or denial of admittance.

NOTE: You may have applied previously for the PRE or the EPPP in Minnesota with a master's degree or the equivalent of a master's degree in a doctoral program. If you now have been conferred a doctorate degree that was not APA-accredited when you earned your degree, you may need to submit supporting documentation when you are applying for the examination based on a degree that the Board has never approved in the past (for example, the doctoral degree as opposed to the master's degree).

ABOUT WAIVERS AND VARIANCES

Waivers and variances are defined in Minnesota Rule 7200.0100. A waiver is Board-authorized permission not to comply with a rule. A variance is Board-authorized permission to comply with a rule in a manner other than that generally specified in the rule. Minnesota Rule 7200.6000 gives the criteria for the use of a waiver or variance. To maximize the possibility that a waiver or variance request will be granted by the Board, be sure to address the appropriate criteria, as specified in Minnesota Rule 7200.6000. If a waiver or variance becomes an option for you, you may request a form or address the criteria in a letter, which must be received in the Board office before applicable deadlines in order to be considered with your application. You may wish to confer with staff in the Board's licensure unit if you think you might need a waiver or variance.

THE COMPLETED APPLICATION

All completed applications must be notarized and accompanied by the required non-refundable processing fee, supporting documentation, and waiver/variance requests. All applicants must have their official transcripts, conferring the degree upon which this application is based, sent directly from the school to the Board office. Applicants with doctoral degrees from APA-accredited programs must have official certification of the APA accreditation sent to the Board office directly from the APA or your school. Be sure to read the licensure requirements and the Rules of Conduct in the Psychology Practice Act booklet before signing the application.

The section of the application that requires the most attention from the applicant and the Committee is usually question 12a –12d. Therefore, pay close attention to any coursework you are required to list in each course area. The most common reason an applicant is denied admittance to an examination is failure to list coursework, when applicable, that demonstrates to the Board that the applicant has the required number of graduate credits in a course area. If your program was not APA-accredited at the time you graduated, this is the section of the examination application where you demonstrate to the Board that the courses you took for your degree program meet the educational requirements for licensure. The burden of proof is on you, the applicant, to make the showing to the Board that your graduate coursework meets the educational requirements in Minnesota Rule 7200.1300.

When an examination application is received, neither the Committee nor the Board makes any assumptions about your placement of a course. On occasion, the Committee has a question about whether a course you listed fits into the specific area. If so, the Committee will have staff notify you that the content of a certain course offering is being questioned, because the course title does not indicate the course content. In such a case, the Committee may ask you for the course syllabus, or for other information to document that the course you listed actually fulfills a course area. The Committee will review additional documentation and Board staff will work with you on the completion of your application.

Because of the volume and nature of the Committee's workload, it cannot compare your application file to the files of others from your same program, nor can the Committee peruse your transcript for other coursework that might satisfy a course requirement. It is possible that applicants who applied before you may have submitted additional documentation that you did not submit or supplemented their education with training or other experiences that allowed the Board to favorably consider a waiver or variance request.

Following Board action on your application, you will be notified, in writing, whether you were admitted or denied admittance to the examination.

ACCREDITATION

Minnesota licensure as a License Psychologist requires a doctoral degree with a major in psychology from an educational institution that is accredited by a regional accrediting association. A new rule became effective in June 2006 that states that the educational requirements for licensure based on a doctoral degree are deemed met if the doctoral degree on which licensure will be based was earned in a doctoral program that was accredited by the American Psychological Association (APA) at the time the degree was conferred. The Committee does not conduct a course-by-course review of doctoral level applications when the degree program was APA-accredited at the time the degree was earned.

SEND THE PROCESSING FEE ALONG WITH THE PROPERLY COMPLETED APPLICATION FORM AND SUPPORTING DOCUMENTATION TO:

MINNESOTA BOARD OF PSYCHOLOGY
ATTN: LICENSURE UNIT
2829 UNIVERSITY AVENUE SE, SUITE 320
MINNEAPOLIS, MINNESOTA 55414-3237

Please make sure you are filing the most current version of this form. Before submitting this form visit us online at www.psychologyboard.state.mn.us go to "Licensing" and click on "Forms". The date shown at the bottom of each page should match the date shown on the current online form.

Keep a copy of your application for your records.
Be sure to notify the Board office immediately when you change your mailing address.

NOTICE TO EXAMINATION APPLICANTS ABOUT SPECIAL ACCOMMODATIONS

Individuals with a disability, who need a reasonable accommodation to sit for the examination, should take note of the attached Notice to Examination Applicants about Special Accommodations. You may contact the Board office at (612) 617-2230 or through the Minnesota Relay Service at 1(800) 627-3529; ask to be connected to the Board of Psychology.

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CORE COURSE GRID

| CORE COURSE AREA | LOOKING FOR COURSES IN: | NOT LOOKING FOR COURSES IN: |
|--|--|---|
| a. Scientific Method | -statistics, experimental design -research design -methodology -philosophy of science | -psychometric theory -psychological assessment -how to get your thesis done (expert as it relates to <u>research design</u>) -DSM IV |
| b. Theories of Measurement | -psychometric theory (reliability & validity) -quantitative-theories of psychological measurement | -how to administer, score &interpret specific psych- ological assessment tech- niques (e.g. WAIS, MMPI,Rorschach) -statistics |
| c. Biological Bases of Behavior | -physiological psychology -comparative psychology -neuropsychology -sensation and perception -psychopharmacology | -family therapy -sex therapy -biofeedback (applications) -chemical dependency counseling - DSM IV |
| d. Cognitive-Affective-Bases of Behavior | -learning (human or animal) -motivation -emotion -cognitive processes -problem-solving behavior | -rational-emotive or cognitive-behavioral therapy |
| e. Social Bases of Behavior | -social psychology -group processes/dynamics -interpersonal relationships -organization & systems theory -cross cultural psychology -race, gender & other demographic variables | -marriage and family therapy -group psychotherapy techniques -race and/or gender as issues in psychotherapy e.g.Counseling of Women" |
| f. Personality Theory- Human Development | -abnormal psychology -developmental psychology -child psychology -adolescent psychology -psychology of aging -theories of personality -developmental psychopathology -professional ethics | -general courses on history &systems of psychology -personality assessmenttechniques (e.g., MMPI, Rorschach) |
| g. Professional Ethics- Code of Conduct, Issues of Professional Practice | -professional standards of care (e.g., competence and ethics) | -courses on professional issues unrelated, or only tangentially related, to ethics and standards of proper conduct (e.g., getting referrals and building a practice, coping with managed care review, insurance reimbursement maximization). -most practicum courses |

| APPLIED PSYCH COURSES | LOOKING FOR COURSES IN: | NOT LOOKING FOR COURSES IN: |
|--|---|---|
| 1. Application of Psychological Principles To Problem Identification | -assessment (e.g., Rorschach WISC-III, WAIS-R, MMPI, DSM IV, behavioral assessment) -evaluation -data collection (or any combination of these areas) | -treatment techniques -case supervision courses (unrelated to assessment) |
| 2. Application of Psychological Principles To Problem Solution | -psychological intervention -analysis of sexual therapies, biofeedback, hypnosis -individual therapy -behavior therapies -group therapy -CD counseling -marriage counseling -rational emotive or cognitive-behavioral therapy -Adlerian therapy | |

NOTE:

1. Educational requirements for licensure require 3 graduate quarter credits or their equivalent in each of the above seven core course areas.
2. Educational requirements for licensure require 6 graduate quarter credits or their equivalent in each of the above two applied psychology areas.
3. The tables above summarize the Application Review Committee's understanding of the types of courses which generally fit, or generally do not fit, into the various categories of Minnesota Rule 7200.1300, subpart 4.

This list is not meant to be exhaustive. It represents our experience over the past years in evaluating applicants' submissions.

Effective December 31, 2011, the licensure of all Licensed Psychological Practitioners will be terminated without further notice and licensure as Licensed Psychological Practitioners shall be eliminated in the State of Minnesota.



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| | |
|----------------------------|----------------|
| FOR BOARD USE ONLY: | |
| DATE: | _____ |
| FEE: | \$150.00 _____ |
| DEPOSIT: | _____ |

FEE
 \$150.00 certified check,
 cashier's check or money
 order made payable to:
 MN Board of Psychology
 (personal check will NOT
 be accepted)

**APPLICATION FOR ADMISSION TO THE
 PROFESSIONAL RESPONSIBILITY EXAMINATION
 (PRE)**

SECTION A
 (Please print or type)

| | | |
|---|---|--|
| 1. Legal Name: last first middle | | |
| 2. Maiden or other name: | 3. Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female | 4. Date of birth: mm/dd/yyyy |
| 5. Are you a MN re-applicant for the PRE? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, give date: _____ | | 6. Have you applied for and been admitted to the EPPP in Minnesota? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 7. Degree this application is based: <input type="checkbox"/> Doctoral <input type="checkbox"/> Other: _____ (Specify) | | |
| 8. Date entered graduate program with a major in psychology: ____/____/____ mm dd yy | | |
| 9. HIGHEST DEGREE AWARDED (<i>check one</i>) <input type="checkbox"/> PhD <input type="checkbox"/> PsyD <input type="checkbox"/> EdD <input type="checkbox"/> Other: _____ (Specify) | | |
| 10. EDUCATION DOCTORAL LEVEL | | |
| APA-Accredited <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| Date Degree Granted:* mm/dd/yy _____ / _____ / _____ | | |
| Granting Institution: _____ | | |
| Department: _____ | | |
| Major: _____ | | |
| Minor: _____ | | |
| Major Advisor: _____ | | |
| Dissertation/thesis title: _____ | | |

| |
|---|
| FOR BOARD USE ONLY: APA documentation |
| DATE: _____ |

IF NOT ALREADY SUBMITTED
***TRANSCRIPTS OF ALL GRADUATE WORK MUST BE SENT
 DIRECTLY FROM YOUR SCHOOL TO THE BOARD**

| |
|--|
| FOR BOARD USE ONLY: Practice Act Mailed: |
| DATE: _____ Initials: _____ |

NAME OF APPLICANT:

SECTION B

Are you now or have you ever been licensed/certified to practice psychology or any mental health profession in any jurisdiction (including Minn.)? YES NO
If **YES**, name the jurisdiction: _____; profession _____.
(Official verification of all current and inactive license(s)/certification(s)/other credential must be sent directly from the appropriate agency to the MN Board of Psychology.)

SECTION C

| | | |
|--|-------------------------|-------------------------|
| Specify your 1st and 2nd choice of the dates you can take the PRE: | 1st CHOICE: / / | 2nd CHOICE: / / |
| (A confirmation notice will be sent to you indicating the first available opening on which you may take the PRE.) | | |

SECTION D

TRAINING

11a. List other graduate training in psychology such as workshops, seminars, etc., which do not appear on your transcript. (List organizations and dates of attendance).

11b. List all internships, practica, etc., which do not appear on your transcript.

NAME OF APPLICANT:

EDUCATION

12. Complete this section **only** if the degree upon which your application is based was earned **after June 30, 1991**, but your degree program was not APA-accredited at the time you earned the degree. If your degree program was APA-accredited at the time you earned the degree, **DO NOT COMPLETE QUESTION 12**; skip to Section E of the application. If your degree program was earned **before July 1, 1991**, **DO NOT COMPLETE QUESTION 12**; skip to Section E of the application.

| 12a. CORE COURSE REQUIREMENTS - Three quarter credits or their equivalent per core area are required | | | | | | | |
|---|--|---------------|----------------------|---------------------|----------------------------|-----------------------|-----------------------|
| | CORE COURSE | SCHOOL | COURSE NUMBER | COURSE TITLE | SEM (S) QTR (Q) | NUMBER CREDITS | BOARD USE ONLY |
| a | Scientific Method | | | | | | |
| | | | | | | | |
| | | | | | | | |
| b | Theories of Measurement | | | | | | |
| | | | | | | | |
| | | | | | | | |
| c | Biological Bases of Behavior | | | | | | |
| | | | | | | | |
| | | | | | | | |
| d | Cognitive-Affective Bases of Behavior | | | | | | |
| | | | | | | | |
| | | | | | | | |
| e | Social Bases of Behavior | | | | | | |
| | | | | | | | |
| | | | | | | | |
| f | Personality Theory-Human Development | | | | | | |
| | | | | | | | |
| | | | | | | | |
| g | Professional Ethics Code of Conduct, Issues of Professional Practice | | | | | | |
| | | | | | | | |
| | | | | | | | |

NAME OF APPLICANT:

| 12b. APPLIED PSYCHOLOGY COURSE REQUIREMENTS - <u>SIX</u> quarter credits or their equivalent per applied course area are required | | | | | | | |
|---|---|--------|---------------|--------------|-----------------|----------------|----------------|
| | APPLIED PSYCHOLOGY COURSE | SCHOOL | COURSE NUMBER | COURSE TITLE | SEM (S) QTR (Q) | NUMBER CREDITS | BOARD USE ONLY |
| 1 | Application of Psychological Principles to Problem Identification | | | | | | |
| | | | | | | | |
| | | | | | | | |
| 2 | Application of Psychological Principles to Problem Solution | | | | | | |
| | | | | | | | |
| | | | | | | | |

A minimum of **2,000 HOURS FOR A DOCTORAL DEGREE** of supervised practical field or laboratory experience in psychology related to the program of the applicant are required. The experience must be completed within 24 months in not more than three settings with at least **20 HOURS A WEEK** and no less than one-third of the total hours in each setting.

| 12c. PRACTICAL FIELD EXPERIENCE REQUIREMENTS | | | | | | | | |
|---|--------|---------------|---------------------|---------------|-----------------|-----------------|--------|-----------------|
| TOTAL NUMBER OF HOURS OF PRACTICAL FIELD EXPERIENCE: Hours _____ (write total number of hours) | | | | | | | | |
| | SCHOOL | COURSE NUMBER | ACADEMIC SUPERVISOR | SITE LOCATION | SITE SUPERVISOR | BEGIN/END DATES | HRS/WK | SUPERV'D HRS/WK |
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | | | | | | | |

FOR EACH PRACTICAL EXPERIENCE LISTED ABOVE, PLEASE PROVIDE THE FOLLOWING INFORMATION:

| 12d. SUPERVISOR QUALIFICATIONS | | | | | |
|--------------------------------|---|--------------------------|--|------------------------------|--------------------|
| | NAME OF SUPERVISOR WHO IS LICENSED/LICENSABLE AS A MINNESOTA PSYCHOLOGIST | MINNESOTA LICENSE NUMBER | OTHER STATE LICENSED IN AND LICENSE NUMBER | DEGREE/MAJOR IF NOT LICENSED | SUPERVISOR ADDRESS |
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |

NAME OF APPLICANT:

SECTION E

STATE OF _____

COUNTY OF _____

I hereby swear (or affirm) that the foregoing statements are true and correct to the best of my knowledge and belief, and that I have answered all questions on the application fully, completely, and without omission. I also swear (or affirm) that I have read the Rules of Conduct adopted by the Minnesota Board of Psychology and ascribe to those Rules.

Signature of Applicant

Subscribed and sworn to before me this _____ day of _____, 20_____

Signature of Notary Public

Stamp area

FOR BOARD USE ONLY:

- Admitted to Examination
 Denied Admission to Examination

Reason for Denial

DATE: _____

Signature of Board Chair (denial only)

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NAME OF APPLICANT:

Pursuant to Minnesota Statute §13.41, subd. 2(b), a licensee who is subject to a health-related licensing board, must designate to the Board a residence or business address and telephone number at which the licensee can be contacted in connection with the license. These data are to be maintained in the Board's records as public data. Therefore, the address and phone number you designate below is the address and phone number we will release in response to public inquiries, and is the address & phone number the Board will use for all contacts to the licensee regarding your license. If a licensee changes addresses & phone numbers before the next renewal, it is the licensee's responsibility to so notify the Board. Please do so in writing.

| | |
|--------------------------------|--------------------|
| NAME: last first middle | HOME PHONE: |
|--------------------------------|--------------------|

| | | |
|---------------------------------------|-------------------------|----------------|
| HOME ADDRESS: (street address) | (city, state, zip code) | COUNTY: |
|---------------------------------------|-------------------------|----------------|

| | |
|------------------------------------|------------------------|
| NAME OF BUSINESS OR AGENCY: | BUSINESS PHONE: |
|------------------------------------|------------------------|

| | | |
|---|-------------------------|----------------|
| BUSINESS ADDRESS: (street address) | (city, state, zip code) | COUNTY: |
|---|-------------------------|----------------|

Designated address for official Board mailings: Home Business

Designated address for release to Public: Home Business

Designated public phone number for release to Public: Home Business

Please provide your e-mail address:

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Tax Clearance Information Form

PLEASE SEND THIS COMPLETED PAGE IN A SEPARATE ENVELOPE FROM YOUR APPLICATION

Pursuant to Minnesota Statute §270C.72 Tax Clearance: Issuance of Licenses, the licensing authority is required to provide to the Minnesota Commissioner of Revenue your social security number. Under the Minnesota Government Data Practice Act and the Federal Privacy Act of 1974, we are required to advise you of the following regarding the use of this information:

- 1. This information may be used to deny the issuance, renewal or transfer of your license in the event you owe the Minnesota Department of Revenue delinquent taxes, penalties or interest;*
- 2. Upon receiving this information, the licensing authority will supply it only to the Minnesota Department of Revenue. However, under the Federal Exchange of Information Agreement, the Department of Revenue may supply this information to the Internal Revenue Service;*
- 3. Failure to supply this information may jeopardize or delay the processing of your licensing issuance or renewal application.*

| | | | |
|--------------------|------|-------|--------|
| Legal Name: | last | first | middle |
|--------------------|------|-------|--------|

| |
|--------------------------------|
| Social Security Number: |
|--------------------------------|

PLEASE SEND THIS COMPLETED PAGE IN A SEPARATE ENVELOPE FROM YOUR APPLICATION TO:

MINNESOTA BOARD OF PSYCHOLOGY
ATTN: TAX CLEARANCE
2829 UNIVERSITY AVENUE SE, SUITE 320
MINNEAPOLIS, MINNESOTA 55414-3237

Please make sure you are filing the most current version of this form. Before submitting this form visit us online at www.psychologyboard.state.mn.us go to "Licensing" and click on "Forms". The date shown at the bottom of each printed page should match the date shown on the current online form.

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**Professional Responsibility Examinations
(PRE)
Calendar Year 2011**

| |
|-------------------------|
| Wednesday, January 26 |
| Wednesday, February 23 |
| Wednesday, March 30 |
| Wednesday, April 27 |
| Wednesday, May 25 |
| Wednesday, June 29 |
| Wednesday, July 27 |
| Wednesday, August 31 |
| Wednesday, September 28 |
| Wednesday, October 26 |
| Wednesday, November 23 |
| Wednesday, December 28 |

*The PRE will be administered on the above dates at:
University Park Plaza
2829 University Avenue SE, Minneapolis
Conference Room A (4th Floor)
1:30 p.m. to 4:00p.m.*

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2010 Final Calendar

| Application Review Committee (ARC) Meeting | Board Meeting |
|---|----------------------|
| January 8 | January 22 |
| February 12 | February 26 |
| March 26 | April 9 |
| April 30 | May 14 |
| June 4 | June 18 |
| July 23 | August 6 |
| August 27 | September 3 |
| September 24 | October 8 |
| October 29 | November 12 |
| December 3 | December 17* |

***Final Board Meeting of Year 2010**

Unless otherwise specified, the Application Review Committee (ARC) Meetings will begin at 8 am.
 All meetings are held in the Board Room of the Minnesota Board of Psychology at the above address.

Dates and times are subject to change.