

PETITION FOR EARLY TERMINATION AND/OR MODIFICATION OF PROBATION INFORMATION SHEET

General Information:

Business and Professions Code § 2962 allows an individual to petition the California Board of Psychology (Board) for modification or early termination of probation, modification of a penalty, or modification of a condition of probation after a period of not less than:

At least two years for modification of a condition of probation At least two years for early termination of probation of three years or more At least one year for early termination of probation of less than three years

The burden of proof is on the petitioner to establish by clear and convincing evidence that the petitioner is entitled to have their petition granted under California law. It is the petitioner's responsibility, to provide the Board with sufficient evidence to establish that it will be safe for consumers if the petition is granted. The petitioner must show that they are sufficiently rehabilitated and competent to safely practice psychology. It is not the purpose of the petition hearing to retry the original case.

The petitioner must produce all appropriate documentation as evidence of the petitioner's rehabilitation. The probation monitor will prepare a summary report of compliance with probation to the Board for admission into evidence.

Instructions for Completing the Application:

The petition package will be returned to the petitioner if it is not legible, not fully completed, or not prepared in accordance with the following instructions. Complete and assemble the original Petition application with the required attachments as described in Section VIII (located on Page 3 of the Petition form) and mail the complete application package to:

Board of Psychology Attn: Probation Coordinator 1625 N. Market Blvd., Suite N-215 Sacramento, CA 95834

Hearing:

The petitioner will be sent a written notice of the time, date and location of the hearing at least 30 days prior. Petitions are heard by the Board in a formal administrative hearing that resembles a court proceeding. At the petition hearing, the petitioner will have an opportunity to present evidence of rehabilitation and competency.

Questions and Answers about the hearing:

- 1. How is the hearing conducted? An Administrative Law Judge will preside over the hearing proceedings. The Board members of the Board of Psychology will hear your petition. You will sit at a table in front of the Board and the Administrative Law Judge. A Deputy Attorney General (DAG) from the Office of the California Attorney General will represent the State. The DAG will make a preliminary statement outlining all disciplinary actions that have been taken against your license, and describe the documents you have submitted into evidence. The DAG may ask you questions about your violation and discipline, and efforts you have undertaken to rehabilitate yourself.
- 2. What will I be expected to do? You will be sworn under oath by the judge who will ask you to state in your own words what you have done to rehabilitate yourself and to maintain current psychological knowledge and skills. Be prepared to make an oral presentation at this point, which includes such a statement. The Board members, the judge, and the DAG will ask questions to clarify your statement or elicit additional information regarding your rehabilitation and current competency. The hearing is recorded by a court reporter.
- May I be represented at the hearing by an attorney?
 Yes, but it is not required. You may represent yourself or you may be represented by an attorney.
- 4. May I have persons come to speak on my behalf?
 Yes. However, their testimony and yours should be directed specifically toward your psychological competence and/or rehabilitation. You may choose to bring family members or friends for support even if they do not testify.
- 5. Will there be an audience at my hearing?
 Yes, the hearing will be conducted at a public meeting
- 6. Is there a contact person I must check in with when I arrive at the hearing? Yes. The Board Enforcement Program Manager or designee will meet you at the entrance to the Board meeting. You should check in with him or her so the Board knows you are present.

Final Decision:

After the hearing, the Board will meet in a session closed to the public, and make a decision on your petition. The decision will be sent to you in the mail, and it will not be announced orally at the hearing. The Board's decision to grant or deny your petition is usually mailed to petitioners within approximately six to eight weeks. The decision is not final until this legal document is mailed to you.

If a petitioner fails to appear for his/her scheduled hearing, this will result in a default decision to deny the petition for modification/termination of probation.

If you have any questions regarding your Petition, you may contact the Probation Coordinator at (866) 503-3221 or (916) 574-7235.





PERSONAL INFORMATION:

PETITION FOR: DEARLY TERMINATION OF PROBATION DISCRIPTION OF PROBATION

Name:			
	Last	First	Middle
Address:	:		
	Street	City	State Zip
Phone:	()	()	
	Home/Cell	Office	
Email:			
II. ATTO	RNEY INFORMATION, IF AP	PLICABLE:	
Name:			
	Last	First	Middle
Address:			
	Street	City	State Zip
Phone:	()	()	
	Office	Other	
□ Northe □ Southe	ING LOCATION PREFERENCE ern California ern California available Location	CE (Please check one):	
V. LICEN	ISE INFORMATION:		
License	Number:	Date Licensed:	/ /
Effective	date of disciplinary order:	/ /	<u> </u>
	or prior professional in other states or s:		

V.	EMPLOYMENT HISTORY (list for the past 5 years only): me, address, phone number, contact person & dates (attach addition	al sheets if	
nec	cessary):	nal sheets attac	ched
	RECENT BACKGROUND: Ince the effective date of the disciplinary action affecting your license ease answer the following:	Y	N
	Are you currently on criminal or court ordered probation or parole? *If		
В.	. Had or have any criminal charges pending against you?		
	 Been convicted of any criminal offense? Must include no contest pleas and any conviction that was subsequently dismissed 		
D	 Disregard traffic offenses resulting in a \$300 fine or less Been required to register as a sex offender? 		
	Been required to register as a sex offender? Been charged or disciplined by any licensing board?		
	Been disciplined by any hospital as to staff privileges?		
	. Had any civil malpractice claims filed against you?		
	Been affected, or are you currently affected, by any physical or menta condition that in any way impairs or limits your ability to practice psychology with safety to the public?		
Ī.	Used, or are you currently using, any chemical substance(s) that in an way impairs your ability to practice psychology with safety to the	у	
J.	public? Are you engaged in the illegal use of controlled or dangerous substances, or were you so engaged recently enough such that your use of these substances may have an ongoing impact on your ability to	<u> </u>	

function as a psychologist?

If you answered yes to any of the above, please put forth explanatory details in your narrative statement and provide any applicable documents.

VII. DECLARATION:

I declare under penalty of perjury under the laws of the State of California that the
foregoing is true and correct and that all statements and documents attached in support
of this Petition are true and correct.

Petitioner Signature	Date	

VIII. PETITION FORMS/ATTACHMENTS:

- A. In a detailed narrative statement address this question: Why do you feel your petition should be granted?
- B. Disciplinary Action Information Sheet
- C. Evidence of Rehabilitation Sheet
- D. Therapy Information Sheet (if applicable)
- E. Practice Monitor Information Sheet (if applicable)
- F. Authorization for release of medical, psychological, alcohol and/or drug abuse treatment records.

Submit the <u>Original</u> Petition package, with all required attachments/forms, to the Board of Psychology as outlined in the Petition for Early Termination and/or Modification of Probation Information Sheet.

BOARD OF PSYCHOLOGY ATTACHMENT B

PETITION FOR EARLY TERMINATION AND/OR MODIFICATION OF PROBATION **Disciplinary Action Information Sheet** (Use additional paper for answers, if necessary)

1.	Describe the events that led to your discipline:
2.	If life stressors led to your action(s)/inaction(s), what support system(s) do you now have in place to assist you in similar stressful situations?
3.	Was it your behavior(s) that led to your license being disciplined? Yes $\ \square$ No $\ \square$
4.	Do you accept full responsibility for the behavior(s) that led to your license being disciplined? Yes No
5.	Did you provide restitution of any kind in this case? Yes No (If yes, please describe what restitution was made.)
6.	How do you think your action(s), inaction(s) or issues that led to discipline have affected patients(s) and/or their family members?
7.	How would you handle the situation that led to your discipline if it were to happen today?
8.	What assurance(s) can you provide to the Board that you will not re-offend?
9.	Have you complied with all of the terms and conditions of your probation? (If no, please describe why you have not complied with each condition of your probation.)

BOARD OF PSYCHOLOGY ATTACHMENT C

PETITION FOR EARLY TERMINATION AND/OR MODIFICATION OF PROBATION Evidence of Rehabilitation Information Sheet

(Use additional paper for answers, if necessary)

1. - -	Have you taken any coursework in the area(s) pertaining to the conduct that led to your discipline? Yes No (If yes, list each course below and the date you took it.)
- 2.	Have you sought therapy regarding the conduct that led to your discipline? Yes □ No □ (If yes, what insight have you gained from this experience?)
-	
3.	If yes, and this was a condition of your probation, your therapist must complete Attachment D Have you undergone medical treatment or attended rehabilitative or treatment programs related to the conduct that led to your discipline? Yes No (If yes, please describe the treatment or programs and their impact on you.)
-	
4. -	What have you done, if anything, to stay current in the field of psychology?
- -	
5. -	If substance abuse was an underlying cause for discipline, do you have a relapse prevention plan or a sponsor? Yes □ No □
-	
6. _	Please list any additional information you feel is relevant to your rehabilitation.
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BOARD OF PSYCHOLOGY ATTACHMENT D

PETITION FOR EARLY TERMINATION AND/OR MODIFICATION OF PROBATION Therapy Information Sheet (Use additional paper for answers, if necessary)

is petitioning the Board of Psychology for exmodification of probation. This questionnaire is designed to provide in Psychology regarding the therapy you provided to the above named in appreciates any and all information that you can provide that may asseptition should be granted. A signed authorization for release is attack questionnaire as thoroughly as possible and add any additional informative any questions regarding this form, please contact the Board of F Coordinator at (916) 574-7735.	formation to the Board of ndividual. The Board sist them in determining if the ned. Please complete the nation you feel is relevant. If you
1. When did therapy begin? End?	
2. How often did you meet and how long was each session?	
3. What problems were presented?	
4. What were the goals of therapy?	
5. Were the goals achieved?	
6. Do you have an opinion about the petitioner's ability to practice ps	ychology safely?
7. Did you know about the discipline? Yes □ No □ When were you	u notified?
8. Have you read a copy of the decision?	
9. Do you have any additional information to add?	
I declare under penalty of perjury under the laws of the State of Califo and correct.	ornia that the foregoing is true
Signature	Date
Print Name	

BOARD OF PSYCHOLOGY ATTACHMENT E

PETITION FOR EARLY TERMINATION AND/OR MODIFICATION OF PROBATION Practice or Billing Monitor Information Sheet (Use additional paper for answers, if necessary)

Ps Th de co rel	is petitioning the Board of Psychologodification of probation. This questionnaire is designed to prosychology regarding the practice or billing monitoring you prome Board appreciates any and all information that you can protectermining if their petition should be granted. A signed authoromplete the questionnaire as thoroughly as possible and add levant. If you have any questions regarding this form, please robation Coordinator at (916) 574-7735.	ovide information to the Board of vided to the above named individual. Ovide that may assist them in ization for release is attached. Please any additional information you feel is
1.	When did you begin monitoring? End?	
2.	How often did you meet and how long was each session?	
3. _	What problems were presented?	
4. _	What were the goals of monitoring?	
5. _	Were the goals achieved?	
6. _	Do you have an opinion about the petitioner's ability to pract	ctice psychology safely?
7. -	Do you have any additional information that you would like	the Board to consider?
	declare under penalty of perjury under the laws of the State of the Correct.	of California that the foregoing is true
	Signature	Date
	Print Name	



AUTHORIZATION FOR RELEASE OF MEDICAL, PSYCHOLOGICAL, ALCOHOL OR DRUG ABUSE RECORDS

I, the undersigned, hereby authorize:		
To disclose records (for the purpose of petitioning for early terminal modification of my probation) prepared in the course of my diagnos		
CALIFORNIA BOARD OF PSYCHOLOGY 1625 North Market Blvd., Suite N-215 Sacramento, CA 95834		
This authorization shall remain valid until the Board of Psychology California completes its petition investigation or one year from the		
I understand that I have a right to receive a copy of this authorizati me.	on if requested by	
A copy of this authorization shall be as valid as the	e original	
	. <u></u>	
Signature	Date	
Print Name		

BOARD OF PSYCHOLOGY ATTACHMENT E