

TO BE COMPLETED IF YOU ARE REPORTING A CONVICTION OR LICENSE DISCIPLINARY ACTION
(SEE PAGE 2 FOR REQUIRED DOCUMENTATION)

*If you are reporting more than one conviction/license disciplinary action,
please complete a copy of this form for each conviction/action.*

NAME OF APPLICANT			
Last	First	M. I.	Jr., Sr., I, II
Conviction/Disciplinary Action Taken by Another State or Country			Date of Offense
Location of Offense (City and State)		Court of Jurisdiction/Agency	
Dates of Imprisonment: _____ to _____		Dates of Parole: _____ to _____	
Dates of Probation: _____ to _____			
Were you enrolled in a substance abuse program?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
<i>If "YES," please complete the following:</i>			
Name of Program	Start Date	Completion Date	
Describe the Underlying Circumstances of the Incident <i>(use additional paper if necessary):</i>			

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature _____

Date _____

Print Name _____

(Revised 3/15)

The following documentation will be required before your file can be reviewed:

CONVICTION OF A CRIME

You must submit all of the following:

- Certified copies of the conviction(s) and disposition of your case from the court clerk of the court in which you were convicted.
- All related police reports.
- Proof of successful completion of probation.
- A letter from you describing rehabilitation efforts or changes you have made to prevent future problems. It is your responsibility to present sufficient evidence of rehabilitation to demonstrate your fitness for licensure.*

PLEASE NOTE: If your conviction involved the use of drugs and/or alcohol, you must also submit certified copies of certificates of completion from each program attended.

LICENSE DISCIPLINARY ACTION

You must submit the following:

- A certified copy of the determination made by the licensing entity. This document should include date and location of the incident, specific violation(s), date of disciplinary action, sanctions or penalties imposed, and the completion dates.
- A letter from you describing rehabilitation efforts or changes you have made to prevent future problems. It is your responsibility to present sufficient evidence of rehabilitation to demonstrate your fitness for licensure.*

*** REHABILITATION**

California Code of Regulations, Title 16, Section 1395, states that when considering the denial of a license or registration under section 480 of the Code, the Board of Psychology, in evaluating the rehabilitation of the applicant and his or her present eligibility for a license or registration, will consider the following criteria:

- The nature and severity of the act(s) or crime(s) under consideration as grounds for denial.
- Evidence of any act(s) committed subsequent to the act(s) or crime(s) under consideration as grounds for denial which also could be considered as grounds for denial under section 480 of the Code.
- The time that has elapsed since commission of the act(s) or crime(s) referred to in subdivision (1) or (2) of section 1395.
- The extent to which the applicant has complied with any terms of parole, probation, restitution, or any other sanctions lawfully imposed against the applicant.
- Evidence, if any, of rehabilitation submitted by the applicant.

Collection and Use of Personal Information

The Department of Consumer Affairs and the California Board of Psychology collect the information requested on this form as authorized by Business and Professions Code sections 325 and 326 and the Information Practices Act.

Access to Your Information

You may review the records maintained by the California Board of Psychology that contain your personal information, as permitted by the Information Practices Act. See contact information below.

Possible Disclosure of Personal Information

We make every effort to protect the personal information you provide us. However, we may need to share the information you give us with other government agencies. This may include sharing any personal information you gave us.

The information you provide may also be disclosed in the following circumstances:

- In response to a Public Records Act request, as allowed by the Information Practices Act;
- To another government agency as required by State or Federal law; or
- In response to a court or administrative order, a subpoena, or a search warrant.

Contact Information

For questions about this notice or access to your records, you may contact the California Board of Psychology, 1625 North Market Boulevard, Suite N-215, Sacramento, CA 95834; by phone at (866) 503-3221; or by e-mail at bopmail@dca.ca.gov. For questions about the Department's Privacy Policy, you may contact the Department of Consumer Affairs at 1625 North Market Boulevard, Sacramento, CA 95834; by phone at (800) 952-5210; or by e-mail at dca@dca.ca.gov.