

PSYCHOLOGICAL TESTING TECHNICIAN TRAINING AND EDUCATION VERIFICATION FORM

To be completed by licensed psychologist or registered psychological testing technician.

Instructions:

Proof of completion of a minimum of 80 hours total of education and training relating to psychological or neuropsychological test administration and scoring is required for a registered psychological testing technician application.

A separate verification form from each licensed psychologist or registered psychological testing technician must be completed and accompany the application.

If you are applying online through BreEZe, attach a completed form to your online application.

Applicant Information:

Name

Phone Number

Email

Training:

Direct observation: At least 20 hours of direct observation, including at least 10 hours of direct observation of a licensed psychologist administering and scoring tests, and at least 10 hours of direct observation of either a licensed psychologist or registered psychological testing technician administering and scoring tests. If you are the licensed psychologist(s) or the registered psychological testing technician(s), verify the number of hours as follows:

- ____ hours of direct observation of a licensed psychologist administering and scoring tests (must be a minimum of 10 hours).
- ____ hours of direct observation of a registered psychological testing technician administering and scoring tests.

Administering and scoring tests: At least 40 hours of administering and scoring tests in the presence of a licensed psychologist. If you are the licensed psychologist(s), verify the number of hours as follows:

- ___ hours.

Education: At least 20 hours of education on topics including law and ethics, confidentiality, and best practices for test administration and scoring. This education requirement may include individual or group instruction provided by and/ or engaging in independent learning directed by a licensed psychologist. If you are the licensed psychologist(s) who provided the instruction, verify the number of hours as follows:

- ____ hours: individual or group instruction provided by a licensed psychologist.
- hours: independent learning directed by a licensed psychologist.

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

| Print Name | | License or Registration Number | |
|------------------------------------|-------|--------------------------------|--|
| Phone Number | Email | | |
| Signature | | Date | |
| PDE_23-349 (Revised December 2023) | | | |
| www.psychology.ca.gov | | | |

AFFAIRS