



## PERSONAL DETAILS

(Please print clearly and complete each number below)

1. Title: Mr  Mrs  Ms  Miss  Dr  Other: \_\_\_\_\_

2. Gender: Female  Male  Gender Diverse  3. Date of Birth: Day: \_\_\_\_\_ Month: \_\_\_\_\_ Year: \_\_\_\_\_

4. Full Name: \_\_\_\_\_  
Given/First Names \_\_\_\_\_ Family/Surname (Please underline your Surname) \_\_\_\_\_

5. Previous Name(s): \_\_\_\_\_  
(If applicable enclose relevant documents)

6. Date of Name Change: Day: \_\_\_\_\_ Month: \_\_\_\_\_ Year: \_\_\_\_\_

7. Ethnicity: (Tick the ethnic category most appropriate for you. This data will help the Ministry of Health monitor psychology workforce trends)

Māori Iwi \_\_\_\_\_

New Zealand European  Other European (Specify) \_\_\_\_\_

Pacific (Specify) \_\_\_\_\_  Other Ethnic Group (Specify) \_\_\_\_\_

## CONTACT DETAILS - Please complete all address fields (as required by section 140 of the HPCA Act)

8. Postal (Mail) Address: \_\_\_\_\_  
\_\_\_\_\_

9. Residential (Street) Address: \_\_\_\_\_  
\_\_\_\_\_

10. Workplace: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

11. Phone and Email Details: (Include country/area codes)

Telephone (Home) \_\_\_\_\_ Mobile \_\_\_\_\_

Telephone (Work) \_\_\_\_\_

Email Address(s) (Print clearly) \_\_\_\_\_

## SCOPES OF PRACTICE FOR REGISTRATION

12. Scopes of Practice sought for Registration: (Tick relevant boxes. Refer to back page for definitions of scopes of practice and qualifications)

"Clinical Psychologist" Scope of Practice

"Psychologist" Scope of Practice

"Counselling Psychologist" Scope of Practice

"Neuropsychologist" Scope of Practice

"Educational Psychologist" Scope of Practice

## QUALIFICATIONS FOR REGISTRATION

**13. Psychology qualifications for Registration:** (Please provide details of all psychology qualifications. The Board reserves the right to contact the granting institutions to check information.)

(1) Qualification: \_\_\_\_\_

Granting Institution \_\_\_\_\_

Country \_\_\_\_\_ Date Conferred \_\_\_\_\_

(2) Qualification: \_\_\_\_\_

Granting Institution \_\_\_\_\_

Country \_\_\_\_\_ Date Conferred \_\_\_\_\_

## PREVIOUS APPLICATION(S) FOR REGISTRATION

**14.** Have you previously made an application or held registration with the New Zealand Psychologists Board? No  Yes

Registration number: 90-0

## CHARACTER REFERENCES

**15.** Three confidential character references, one of which must be from a New Zealand Registered Psychologist. Referees should comment on the applicant's character, work experience, and professional standing.

References must be original, on official letterhead (where applicable), signed and dated not more than 3 months from the application date.

These may be submitted with the application or emailed by the referee(s) to [registration@nzpb.org.nz](mailto:registration@nzpb.org.nz).

## CURRICULUM VITAE (CV) OR RESUME

**16.** A copy of your current CV which covers in chronological order (by month & year) the period since graduating and must include all relevant dates and work history. Please ensure any gaps of 3 months or more are explained.

If you are applying for the Intern Psychologist scope, please ensure your CV covers the last 5 years.

## EVIDENCE OF GOOD STANDING

Applies **ONLY** to applicants who have worked and been registered, licensed, or chartered overseas.

**17.** Enclose documentary evidence of Good Standing from any organisation/professional association or regulatory body with which you are currently or have been registered, licensed or chartered within the past 5 years. Document(s) must be dated within 3 months of the application date.

## RECORD OF CRIMINAL CONVICTIONS

If you have a conviction, please include a letter addressed to the Registrar regarding the details of the conviction. The Registrar will consider any conviction(s) on a case-by-case basis. A conviction will not necessarily preclude the granting of registration.

**18.** Please complete the appended NZ Police Vetting Request and Consent form authorising the Board to request disclosure regarding any interaction you may have had with the NZ or Australian Police. If you have resided overseas you will also need to provide a Police Clearance Certificate from each country in which you have lived in the past 5 years, detailing any convictions and dated within 6 months of the application date.

## STATUTORY DECLARATION (UNDER THE OATHS AND DECLARATIONS ACT 1957)

(Consider this Declaration carefully before you sign)

### 19. I MAKE THIS SOLEMN DECLARATION CONSCIENTIOUSLY BELIEVING THE SAME TO BE TRUE AND BY VIRTUE OF THE OATHS AND DECLARATIONS ACT 1957. I SOLEMNLY AND SINCERELY DECLARE THAT:

1. All of the information provided with this application is true and correct in every particular and detail.
2. I will provide the Psychologists Board with any such further information as it may require.
3. I am fit for registration as defined under section 16 of the Health Practitioners Competence Assurance Act 2003 and I know of no information that could cause the Psychologists Board not to be satisfied that I am of good character and reputation and am a fit and proper person to be registered.
4. I do not have a mental or physical condition that renders me unable to perform the functions required for the practice of psychology.
5. I have the qualifications that are prescribed for the scope of practice that I seek to be registered in, and I am competent to practise within that scope of practice.

Full Name \_\_\_\_\_ Signature \_\_\_\_\_  
(Full Name of Applicant) (Signature of Applicant)

Declared at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

Before me \_\_\_\_\_ Signature \_\_\_\_\_  
(Full Name and Signature of person authorised to take a Statutory Declaration)

Address \_\_\_\_\_

Occupation \_\_\_\_\_

**NOTE FOR APPLICANTS:** If the Statutory Declaration is made in New Zealand, it **must** be made before a person entitled under the Oaths and Declarations Act 1957 to take statutory declarations (e.g., a Justice of the Peace, Solicitor, Notary Public).

## APPLICATION FEE

20. The full and correct application fee (\$225.00) must accompany this application form. The fee is **non-refundable** whatever the outcome of the application. Payment can be made by:

**Direct credit** to account 03 0502 0254983 00 **only if paid from a New Zealand bank account**; your name and registration number must show on our bank statement

**Credit Card:** Please debit my  Visa or  MasterCard (NZ\$) 225.00 incl GST.

Card number                 Expiry

Name on Credit Card: \_\_\_\_\_ Cardholder's Signature \_\_\_\_\_ Date \_\_\_\_\_

| SEND YOUR COMPLETED FORM AND FEE TO  |   | ENQUIRIES TO   |  |
|--|---|--|--|
| New Zealand Psychologists Board<br>(Post) PO Box 9644<br>Marion Square<br>Wellington 6141<br>New Zealand | New Zealand Psychologists Board<br>(Courier) Level 5<br>22 Willeston Street<br>Wellington 6011<br>New Zealand | New Zealand Psychologists Board<br>Telephone (64 4) 471 4580<br>0800 471 4580<br>Email: <a href="mailto:registration@nzpb.org.nz">registration@nzpb.org.nz</a> |  |

Application documents are scanned and electronically filed by the Board. All documents are then **securely destroyed**.

| For office use only | Dbase entry created | DC<br>Date paid | CC<br>Date paid | CC authorisation | Dbase updated | Receipt sent | Docs couriered |
|---------------------|---------------------|-----------------|-----------------|------------------|---------------|--------------|----------------|
|                     |                     |                 |                 |                  |               |              |                |



# HPCAA REGISTRATION APPLICATION CHECKLIST

All documents supporting your application for registration must be original(s) or certified copies of originals.

A certified copy is a photocopy of an original document certified as a true copy of the original by an official with the necessary legal power (e.g. a Justice of the Peace, Solicitor or Notary Public). The official must sign with his or her name, position and official seal (where applicable) clearly visible by the signature.

Failure to provide complete documentation in the correct format will result in processing delays.

## ALL APPLICANTS MUST INCLUDE THE FOLLOWING DOCUMENTATION

- A certified colour passport sized photograph. The certifier must state the following: "I certify that I have sighted [full name of applicant] and this is a true likeness" as well as sign and date the reverse of the photo.
- (Item 5): Evidence of any name change (e.g., Birth Certificate, Marriage Certificate, Name Change Certificate).
- (Item 13): An official university Academic Record and transcript recording papers passed, grades obtained for post graduate qualifications and date qualifications were conferred/awarded. An eQuals link can be emailed to [registration@nzpb.org.nz](mailto:registration@nzpb.org.nz)

The Board records only conferred/awarded qualifications. If the transcript does not show this detail, please provide a certified copy of the certificate.

- (Item 15) Three-character references. References can be emailed directly to the Board by the referee to [registration@nzpb.org.nz](mailto:registration@nzpb.org.nz)
- (Item 16) A current C.V. as detailed above.
- (Item 17) A Letter or Certificate of Good Standing from each overseas registration body you have been registered with in the past 5 years, dated within 3 months of the application date.
- (Item 18) Completed and signed NZ Police Vetting Service Request and Consent form with explanatory letter if applicable. If you have resided overseas in the past 5 years, you will also need to provide a Police Clearance Certificate detailing any convictions from each country in which you have lived, dated within 6 months of the application date.
- Two forms of appropriate evidence of identity for Police Vetting purposes. This may include a certified copy of the relevant page of your passport showing your date of birth, nationality and photograph **and** a certified copy of your NZ Driver Licence. Please refer to <https://www.police.govt.nz/advice/businesses-and-organisations/vetting> for further details on acceptable forms of ID.
- (Item 19) Statutory Declaration signed and witnessed.
- (Item 20) Application fee. The Board's GST number is 73-081-238



# SCOPES OF PRACTICE AND QUALIFICATIONS

For psychologists registered in New Zealand under the  
HPCA Act 2003

## SCOPES OF PRACTICE AND PRESCRIBED QUALIFICATIONS

1. **"Psychologist"** - A psychologist within a general scope is defined as rendering or offering to render to individuals, groups, organisations or the public any psychological service involving the application of psychological knowledge, principles, methods and procedures of understanding, predicting ameliorating or influencing behaviour, affect or cognition. Such practice is undertaken within an individual's area and level of expertise and with due regard to ethical, legal, and Board-prescribed standards.

The following qualifications are prescribed for registration as a psychologist in the general scope of practice;

A minimum of a Masters degree in Psychology from an accredited<sup>1</sup> educational organisation, or an equivalent qualification. Eligibility for a general scope of practice requires a Board approved practicum or internship involving 1500 hours of supervised practice.

2. **"Intern Psychologist"** - An intern psychologist within a special purpose scope is defined as rendering or offering to render to individuals, groups, organisations or the public any psychological service involving the application of psychological knowledge, principles, methods and procedures of understanding, predicting ameliorating or influencing behaviour, affect or cognition. Such practice is undertaken within an individual's area and level of expertise and with due regard to ethical, legal, and Board-prescribed standards.

An Intern Psychologist scope of practice may be granted to applicants:

- who have completed formal academic studies that have provided them with the foundation competencies required for safe practice in a supervised internship setting and who are enrolled in a Board-accredited post graduate diploma or doctoral course of studies.

3. **"Trainee Psychologist"** - A trainee psychologist within a special purpose scope is defined as rendering or offering to render to individuals, groups, organisations or the public any psychological service involving the application of psychological knowledge, principles, methods and procedures of understanding, predicting ameliorating or influencing behaviour, affect or cognition. Such practice is undertaken within an individual's area and level of expertise and with due regard to ethical, legal, and Board-prescribed standards.

A Trainee or Intern Psychologist scope of practice may be granted to applicants:

- who have completed formal academic qualifications that have provided the foundation competencies required for safe practice in a supervised setting and who are entering Board-approved supervised practice for the purpose of achieving full registration.

## VOCATIONAL SCOPES OF PRACTICE AND PRESCRIBED QUALIFICATIONS

4. **"Clinical Psychologist"** - Clinical Psychologists apply psychological knowledge and theory derived from research to the area of mental health and development, to assist children, young persons, adults and their families with emotional, mental, developmental or behavioural problems by using psychological assessment, formulation and diagnosis based on biological, social and psychological factors, and applying therapeutic interventions using a scientist-practitioner approach. Such practice is undertaken within an individual's area and level of expertise and with due regard to ethical, legal, and Board-prescribed standards.

The following qualifications have been prescribed for registration as a psychologist in the clinical scope of practice;

A minimum of a Masters degree in Psychology from an accredited educational organisation and an accredited Postgraduate Diploma in Clinical Psychology, or equivalent qualification. Eligibility for a clinical psychology scope of practice shall require a Board-approved practicum or internship involving 1500 hours of supervised practice.

<sup>1</sup> "Accredited" here and in subsequent references means accreditation of the educational organisation, or an educational course, by the New Zealand Psychologists Board for the purpose of registering psychologists.

5. **"Counselling Psychologist"** - Counselling Psychologists apply psychological knowledge and theory derived from research to the area of client empowerment and enhancement, to assist children, young persons, adults and their families with personal, social, educational, and vocational functioning by using psychological assessments and interventions, and preventative approaches that acknowledge ecological, developmental and phenomenological dimensions. Such practice is undertaken within an individual's area and level of expertise and with due regard to ethical, legal, and Board-prescribed standards.

The following qualifications have been prescribed for registration as a psychologist in the Counselling Psychologist scope of practice;

A minimum of a Master's degree in Psychology from an accredited educational organisation and an accredited Postgraduate Diploma in Counselling Psychology, or equivalent qualification. Eligibility for a counselling psychologist scope of practice shall require a Board-approved practicum or internship involving 1500 hours of supervised practice.

6. **"Educational Psychologist"** - Educational Psychologists apply psychological knowledge and theory derived from research to the area of learning and development, to assist children, young persons, adults and their families regarding their learning, academic performance, behavioural, social and emotional development, by using psychological and educational assessments and applying interventions using systemic, ecological and developmental approaches. Such practice is undertaken within an individual's area and level of expertise and with due regard to ethical, legal, and Board-prescribed standards.

The following qualifications have been prescribed for registration as a psychologist in the educational scope of practice;

A minimum of a Masters degree in Psychology<sup>3</sup> from an accredited educational organisation and an accredited Postgraduate Diploma in Educational Psychology, or equivalent qualification. Eligibility for an educational scope of practice shall require a Board-approved practicum or internship involving 1500 hours of supervised practice.

7. **"Neuropsychologist"** - Neuropsychologists apply scientific understanding of the relationship between the brain and neuropsychological function within applied clinical contexts. This approach forms the basis for the assessment, formulation, and rehabilitation of people who have sustained brain injuries or other neurological conditions. Neuropsychologists work with people of all ages who have neurological problems such as traumatic brain injury, stroke, epilepsy, toxic and metabolic disorders, brain tumours, and neurodegenerative diseases. Such practice is undertaken within an individual's area and level of expertise and with due regard to ethical, legal, and Board-prescribed standards.

The following qualifications have been prescribed for registration in the Educational Psychologist scope of practice:

A minimum of a Master's degree in Psychology from an accredited educational organisation and an accredited Postgraduate Diploma in neuropsychology, or equivalent qualification. Eligibility for the Neuropsychologist scope of practice shall require a Board-approved practicum or internship involving no less than 1500 hours of supervised practice.

<sup>3</sup> A Masters degree in Education may be considered equivalent to a Masters degree in psychology where its content is sufficiently educational psychology in nature.