Form for documentation of the practical training programme for obtaining authorisation as a psychologist



**Personal psychotherapy**

You can find an example of a completed form in Danish on the website of the Danish Supervisory Board of Psychological Practice (Psykolognævnet)

1) ....................................................................…………………………..…… ……………………………………

The psychotherapist’s full name in block letters Education

2) **Authorised**

**psychologist: No  Yes ** If Yes: **Authorisation number:**..…..……..…………………………..

3) **Address of the psychotherapist:**

.…………………………………………….………………..…..…………………...

………………………………………………………………….…………………….

…………………………………………………………………….………………….

**I have provided up to 25 hours of personal psychotherapy to**

4) **psychologist:** ………………………………………………….…………………………………………………..…

**The applicant’s full name in block letters**

5) **Personal psychotherapy: (up to 25 hours)**

|  |  |  |
| --- | --- | --- |
| **From date/mth/yr** | **To date/mth/yr** | **Number of hours** |
|  |  |  |

6)

|  |  |
| --- | --- |
| I hereby declare on my word of honour that I, the undersigned, as an **authorised psychologist**, was authorised at the start of the psychotherapy and had worked as a psychologist for at least 3 years after obtaining my master’s in psychology. | **Date**……………………**Signature of authorised psychologist:**………………………………………………. |

7)

|  |  |
| --- | --- |
| I, the undersigned, as a **therapist and non-authorised psychologist**, hereby declare on my word of honour that the attached description of my educational background and professional experience is correct. | **Date**……………………**The therapist’s signature:**………………………………………………. |

**Note: Attach documentation for your education and professional experience as a therapist or non-authorised psychologist.**

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