

PART 6: PROFESSIONAL ETHICS DECLARATION

NOTE: ALL applicants MUST fill out the Ethics Declaration

1. Have you had any action taken against you by a professional organization or a state licensing agency? Yes No
2. To your knowledge are you presently under investigation by any of the above agencies or organizations? Yes No
3. Have you ever been found guilty of a criminal charge (excluding traffic offenses) or liable in a civil action brought against you by any court? Yes No

If you answered yes to any of the above items, please list on a separate sheet of paper each instance, describing briefly the events leading up to the case, the outcome and its relevance to the practice of psychology. This information will be kept in a confidential file.

I agree to subscribe to the purposes of the Association and to maintain the ethical standards of professional conduct as set forth by the Association in its Code of Ethics (the APA Code).

SIGNATURE

DATE

PART 7: METHOD OF PAYMENT

NOTE: Dues payments must accompany your application.
Applications will not be processed until payment is received.

AMOUNT ENCLOSED _____

Check MasterCard Visa AMEX Discover

CREDIT CARD NUMBER

EXP

CVV

SIGNATURE

Return completed application & all necessary supporting materials with the appropriate dues payment to: **Massachusetts Psychological Association, 195 Worcester St, Suite 303, Wellesley, MA 02481** or fax to **781-263-0086**



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