

APPLICATION FOR ADMISSION TO DOCTOR OF PSYCHOLOGY (FORENSIC)

| 1. PERSONAL DETAILS | | | | |
|---|------------------|---|----------|-------------|
| Name: | | | | |
| Address: | | | | |
| Business hours contact number: | | | | |
| Fax number: | | Email address: | | |
| 2. ACADEMIC QUALIFICATIONS | | | | |
| Year | Institution | Award | | |
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| Please include a certified copy of your academic transcript/s with your application. | | | | |
| 3. REGISTRATION | | | | |
| Are you registered as a Psychologist? | | | | |
| Admission to this course is restricted to registered Psychologists. Unlike some other postgraduate psychology courses, this course is not a pathway towards registration. | | | | |
| Yes <input type="checkbox"/> Please include a copy of the AHPRA Register of Practitioners on-line entry detailing your registration status with your application (http://www.ahpra.gov.au/Registration/Registers-of-Practitioners.aspx) | | I expect to be fully registered as a Psychologist by the end of March in the first year of enrolment <input type="checkbox"/> If you won't be fully registered as a Psychologist by the end of March in the first year of enrolment, please defer your application accordingly. | | |
| 4. PROFESSIONAL AFFILIATIONS (e.g. Australian Psychological Society) | | | | |
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| 5. OTHER PROFESSIONAL QUALIFICATIONS | | | | |
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| 6. PROFESSIONAL EXPERIENCE AS A PSYCHOLOGIST | | | | |
| List the positions you have held as a psychologist, starting with the most recent, the dates you have held this position, and a brief description of what the job entailed | | | | |
| Duration | FT, PT or casual | Employer | Position | Main Duties |
| From To | | | | |
| From To | | | | |
| From To | | | | |
| From To | | | | |

