

APPLICATION FOR ADMISSION TO MASTER OF PSYCHOLOGY (CLINICAL)

1. PERSONAL DETAILS				
Name:				
Address:				
Business hours contact number:				
Fax number:		Email address:		
2. ACADEMIC QUALIFICATIONS				
Year	Institution	Award		
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 other MPsych 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)				
5. OTHER PROFESSIONAL QUALIFICATIONS				
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				

