

Application for Registration as Supervisor

Name:
ID No.:
MPPB Warrant No.:
Address:
E-mail address:
Area of Specialisation:

I would like to apply as a Supervisor under:

- a) Board recognised training which must be undertaken following a minimum of 2 years working as psychologist in the area of specialisation, since obtaining the warrant to practice as a psychologist. ☐
- b) Minimum of 6 years working as a psychologist in the area of specialisation, since obtaining the warrant to practice as a psychologist. (Provide letter of attestation that you have been working full time or equivalent as a psychologist in the area of specialisation). ☐
- c) Senior psychologist in organisations, supervising in the field/area practiced ☐

For all the above, please provide necessary documentation supporting your application.

Signature: _____

Date: _____