



College of Psychologists of British Columbia

COLLEGE OF PSYCHOLOGISTS OF BRITISH COLUMBIA Examination for the Practice in Professional Psychology (EPPP) Request for Materials to Apply for Exam

- I have received authorization to proceed to the Examination for the Practice in Professional Psychology (EPPP).

- I have read the document "Registration Requirements" and understand all College policies and procedures related to the EPPP.

- I have read the material provided by the Association of State and Provincial Psychology Boards about the EPPP (e.g., Information for Candidates) available at www.asppb.org.

- I request to receive the materials to apply to take the EPPP and have enclosed the fee specified in the Fee Schedule.

Name: _____

Signature: _____ Date: _____