

Self-Report of APE Competence

For each required area below, please place an X in the rating grid immediate below for the judgment that you believe applies to you and list the formal training that applies. **This rating form is to accompany the relevant APE application form, and, the Rating Form for Supervisors or Assessors/Appraisal of APE Competence (signed by the assessor and yourself).**

Knowledge of:

- **Psychopathology or Abnormal Psychology**

Very Good	Good	Acceptable	More Needed
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List how knowledge of problems of learning, behaviour and mental ability was acquired:

- **Personality and Individual Differences**

Very Good	Good	Acceptable	More Needed
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List how knowledge of psychosocial and life-span development was acquired:

- **Psychological assessment**

Very Good	Good	Acceptable	More Needed
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- **Psychodiagnostics**

Very Good	Good	Acceptable	More Needed
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List how knowledge of psychoeducational diagnostic techniques and interventions was acquired:

OVERALL SELF-APPRAISAL OF STATE OF KNOWLEDGE:

Very Good	Good	Acceptable	Further Knowledge and Training Needed
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Name: _____

Skill in:

- **Establishing therapeutic rapport:**

Very Good	Good	Acceptable	Require More Experience
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- **Eliciting information through interviewing:**

Very Good	Good	Acceptable	Require More Experience
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- **Assessing fundamental psychological processes such as mental state, cognition, emotions and behaviors:**

Very Good	Good	Acceptable	Require More Experience
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- **Formulating and testing diagnostic hypotheses:**

Very Good	Good	Acceptable	Require More Experience
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- **Communicating diagnostic information clearly and sensitively:**

Very Good	Good	Acceptable	Require More Experience
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- **Assessment of change in relevant psychological processes**

Very Good	Good	Acceptable	Require More Experience
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OVERALL DEGREE OF SKILL

Very Good	Good	Acceptable	Requires More Experience
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Formal Training That Includes:

- **Course work and supervised experience in administering and interpreting assessment materials for a diverse range of problems**

Very Good	Good	Acceptable	More Required
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List relevant course work and experience:

Name: _____

- **Either course work or supervised experience, or a combination of the two, in interviewing techniques**

Very Good	Good	Acceptable	More Required
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List relevant course work and experience:

- **Training in formulating and testing diagnostic hypotheses in a practice setting**

Very Good	Good	Acceptable	More Required
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List relevant training:

- **Supervised experience in communicating sensitive information**

Very Good	Good	Acceptable	More Required
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List relevant supervised experience:

- **Either course work or supervised experience, or a combination of the two, in assessment of change in order to evaluate the effectiveness of interventions.**

Very Good	Good	Acceptable	More Required
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List relevant course work and experience:

OVERALL APPRAISAL OF ADEQUACY OF FORMAL TRAINING:

Very Good	Good	Acceptable	More Training and Experience Required
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COMMENTS (please provide any additional information regarding your knowledge, training or experience that may further illustrate your suitability for APE designation:

Applicant's Signature

Date