



# Saskatchewan College of Psychologists

1026 Winnipeg Street  
Regina SK, S4R 8P8

Tel: (306) 352-1699

Fax: (306) 352-1697

Email: [skcp@sasktel.net](mailto:skcp@sasktel.net)

[www.skcp.ca](http://www.skcp.ca)

## Information for Initial Registration

One may not practice as a psychologist, use the title “psychologist” or represent oneself as a psychologist in the province, without licensure with the Saskatchewan College of Psychologists (SCP).

Applicants should review the “*Information Handbook for Applicants*” (can be found on the SCP website under “*Member information*” and then “*Forms*” – *currently under revision*), and may contact the office with general questions about the application process. **Specific questions relating to an application cannot be addressed until one’s application fee has been processed.** Applications are open for one year from the date that the non-refundable application fee is paid.

Documents that must be submitted as part of the initial application:

1. An “*Application Form for Initial Registration*”.
2. An application fee (non-refundable) of \$300.00.
3. Official transcripts of post-secondary and undergraduate degrees relevant to psychology which are to be considered in the application process:
  - Transcripts must be sent directly by the issuing institution to the SCP and must clearly state that the degree one wishes to be licensed under has been conferred.
  - If the degree has not yet been awarded, the application should include an official letter from the Dean of Graduate Studies advising that the applicant has met all of the degree requirements and confirming the date that the degree will be conferred.
  - Applicants must have the minimum of a master’s degree in psychology from a “recognized institution”.
  - If the institution is a Canadian institution, it must be a member of Universities Canada.
  - If the institution is in the USA, it must be accredited by one of the seven regional accreditation bodies recognized by the US Federal Department of Education.
  - If the degree was earned at an institution outside of Canada or the USA, it must be evaluated by ICD through the Association of Canadian Psychology Regulatory Organizations (ACPRO) Portal, and must be assessed as equivalent to a master’s or doctoral degree in psychology that one could earn at a “recognized” Canadian institution.
  - Actual course syllabi (not calendar descriptions) for all courses one wishes to have considered as meeting the Foundational Knowledge requirements should be submitted; if they are not provided this may delay the processing of your application. **Psychology courses to be considered for Foundational Knowledge eligibility MUST have been taken within ten (10) years of one’s date of application for provisional registration.**
4. A verified\* copy of the applicant’s birth certificate. If one’s name has changed since their date of birth, they should also provide verified copies of all relevant documents (i.e. marriage certificate, name change certificate, divorce decree).
5. A “*Consent for Release of Information*” form.
6. A “*Consent for Release of Information to Supervisor(s)*” form.
7. A criminal record check including vulnerable sector screening, dated within six months of the date upon which one submits their application to the College in full.
8. A “*Declared/Intended Areas of Competency and Interventions*” form which clearly identifies the competencies claimed and the populations to be worked with; one should **only** claim area(s) of competency that are congruent with the training they received in their academic program. There should be no more than two claimed areas of competency.
9. An “*Employment Verification*” form which has been signed by the employer/agency under which you intend to complete the supervised practice hours required for provisional

licensure. Applicants should identify themselves by their current title and **not** the title of “psychologist” or “psychologist (provisional)” on this form, in adherence with section 24(1) of *The Psychologists Act, 1997*.

10. A current curriculum vitae that clearly outlines all previous relevant work experience, relevant education, and licensure.
11. An “*Applicant’s Self-Report of MRA Competencies*” form.
12. Three references provided on the “*MRA Competencies Reference Form*”, to be submitted by the reference directly to SCP. Two references must be from psychologists, while the third can be from a professional who has a **graduate degree and is a member in a health-related regulated profession** (e.g., social work). All references **must** be able to speak to your competency(ies) **to practice in psychology** and to address **all** of the competencies outlined in the document. If a reference cannot speak to one or more MRA areas, the applicant will need to provide another reference who meets the above requirements.
13. A “*Supervision Agreement*” which:
  - Identifies all supervisors (primary and secondary);
  - Identifies one or more back-up/emergency supervisors who are not already listed as a primary or secondary supervisor, who would be available to the applicant in emergency situations in the absence of both the primary and secondary supervisors;
  - Addresses how supervision will be provided;
  - The primary supervisor **must** have the areas of practise competency and client populations which the applicant wishes to claim, and that the *Supervision Plan* will address. If the primary supervisor does not have one or more of the competencies intended by the applicant, the secondary supervisor must have made this competency declaration. The primary supervisor is then responsible to delegate the supervision of this particular competency to the secondary supervisor;
  - The final page of the *Agreement* must be signed and dated by the applicant and all primary and secondary supervisors, as well as by a representative of the employing organization (if a primary/secondary supervisor does not already meet these parameters). Please do not have emergency/backup supervisors sign the Agreement.
14. A “*Supervision Plan*” and accompanying “*Goals and Objectives*” document which:
  - Matches the supervision information provided in the *Agreement* (back-up/emergency supervisors should **not** be listed in the *Plan*);
  - The final page of the *Plan* must be signed and dated by the applicant and all primary and secondary supervisors, as well as by a representative of the employing organization (if a primary/secondary supervisor does not already meet these parameters). Please do not have backup/emergency supervisors sign the *Plan*;
  - The *Goals and Objectives* document should be presented in a similar format to the sample available on the SCP website;
  - Once the Registrar has officially approved all application documents (up to the *Supervision Plan*), the *Supervision Plan* will then be submitted to the next Registration Committee meeting for approval.
  - A schedule of tentative upcoming Registration Committee dates can be found on the SCP Website on the “*Forms*” page. Please note: the applicant can **only** be registered as a provisional member once the *Supervision Plan* has been officially approved by the Committee, as per legislation, and after the applicant has been officially notified of their provisional membership acceptance by the Registrar. No applicant will be placed on the Register as a provisional member until they have an approved *Supervision Plan*.
15. A “*Self-Report of APE Competence*” document if one is applying to be practise and be examined for APE.

\* “verified” means: a photocopy signed by a chiropractor, judge, magistrate, police officer, lawyer, mayor, physician, dentist, minister, notary public, optometrist, senior administrator in a regional college, technical institute or university, pharmacist, postmaster, principal of a school, accountant, engineer, signing officer of a bank, a veterinarian who can attest that “this is a true copy of the original document”. The signee should provide their signature, name, position, place of employment, as well as a contact number for verification purposes.