



# Case report submission form

Type: **Internship**

Profession: **Psychology**

This form is for provisional psychologists undertaking a 4+2 or 5+1 internship program or a re-entry to practice program as a cover sheet for submitting case reports to the Psychology Board of Australia (the Board).

The case report development process must be supervised by a Board-approved supervisor. The supervisor must review and provide evaluative feedback to the provisional psychologist throughout the case report process and before the final case report is submitted to the Board.

If case report review and evaluative feedback is delegated to a secondary supervisor the principal supervisor must still review the case report and sign this cover sheet before the provisional psychologist submits it to the Board for final review.

If you are submitting more than one case report at the same time, each case report must have a completed CSSF-76 attached to the front.

Case reports that have been submitted to the Board are not returned; please ensure you keep a copy for your records.

Case reports must meet the criteria set out in the Board's guidelines for the relevant internship program which can be obtained from the Board's website [www.psychologyboard.gov.au](http://www.psychologyboard.gov.au).

## SECTION A: Provisional psychologist's and supervisor's details

### 1. What are the provisional psychologist's details?

Name

Registration number











Email

### 2. Which provisional registration pathway are you undertaking?

4+2 internship

5+1 internship

Re-entry to practice program

### 3. What are the principal supervisor's details?

**Principal supervisor's details**

Name

Registration number











Email

## SECTION B: Case report details

### 4. What is the case report's word count?

The case report word limit is 2500 words. Case reports that exceed the word limit by more than 10 percent will not be accepted.

Word count





### 5. What type of case report is this?

Assessment case report

Intervention case report



6. How many case reports have you previously submitted to the Board for assessment in your current supervision program?

Number of case reports previously submitted

Four empty boxes for entering the number of case reports.

7. How many case reports have been assessed as satisfactory and returned to you in your current supervision program?

Number of case reports assessed as satisfactory and returned

Four empty boxes for entering the number of case reports.



You **must** attach your case report submission checklist that has been completed and signed by the principal supervisor and the provisional psychologist.

SECTION C: Provisional psychologist's declaration

I declare that the attached case report is my own work and is a true record of a real client and describes what actually happened. I have completed the attached submission checklist together with my principal supervisor. I understand that I am not permitted to resubmit a case report that has previously been submitted and accepted for review by the Board. I have kept a copy of this report for my records.

Name of provisional psychologist

Text input field for the name of the provisional psychologist.

Date

Date input field with DD / MM / YYYY format.

Signature of provisional psychologist



SIGN HERE

SECTION D: Principal supervisor's declaration

I have completed the attached submission checklist together with the provisional psychologist. I declare that I have reviewed the attached case report and evaluative feedback has been provided regarding the report and that during the case report development and preparation process the above named provisional psychologist has:

- Three checkboxes with text: 'demonstrated understanding of and adherence to ethical and professional standards', 'demonstrated that he/she operates within their scope of competence...', and 'based the case report entirely on his/her own work with real clients...'.

Name of principal supervisor

Text input field for the name of the principal supervisor.

Date

Date input field with DD / MM / YYYY format.

Signature of principal supervisor



SIGN HERE

Please post this form with required attachments to:

Ahpra GPO Box 9958 IN YOUR CAPITAL CITY (refer below)

You may contact Ahpra on 1300 419 495 or you can lodge an enquiry at www.ahpra.gov.au

Table with 4 columns: Sydney NSW 2001, Canberra ACT 2601, Melbourne VIC 3001, Brisbane QLD 4001, Adelaide SA 5001, Perth WA 6001, Hobart TAS 7001, Darwin NT 0801.