



Psychological Association of the Philippines

**CERTIFICATION OF PSYCHOLOGY SPECIALISTS  
APPLICATION FORM: DEVELOPMENTAL PSYCHOLOGIST**  
(The application period for first time applicants is until March 31, 2018)

**Cover Page**

**Name of applicant:** (Please print in upper case/caps)

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SURNAME/FAMILY NAME	GIVEN NAME	MIDDLE NAME
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**Contact information** (all information is required):

Permanent Residence: \_\_\_\_\_

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Work Address: \_\_\_\_\_

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Phone/Fax: \_\_\_\_\_ Email address: \_\_\_\_\_

**Submission information:**

Date submitted: \_\_\_\_\_

Checklist of application documents for Developmental Psychologist:

- Cover Page of application form
- Completed application form
- Annex A: Transcript of records in relevant graduate degree
- Annex B: Supporting documents for professional experience, if applicable
- Annex C: Supporting documents for professional development activities
- Annex D: NBI clearance or Certification from employer of no criminal record or sanctions
- Two sets of all the documents above, placed in long folder with applicants printed name (SANTOS, M. A.) on the ear of the folder. (*pls. present documents in the listed order*)
- Two folders placed inside one big brown envelope with applicants printed name (SANTOS, M.A.) printed on the upper right hand corner of the front side of the envelope, and the area of specialization applied for printed on the upper left hand side.

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Printed Name and Signature of Applicant

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To be filled up by PAP:

Payment made:  Cash  Check  Others, please specify details: \_\_\_\_\_

Submission Record # \_\_\_\_\_ OR # \_\_\_\_\_

Received by:  
Printed name and signature

**CERTIFICATION OF PSYCHOLOGY SPECIALISTS:  
DEVELOPMENTAL PSYCHOLOGIST**

**APPLICATION FORM**

**Name of applicant:** (Please print in upper case/caps)

\_\_\_\_\_  
*SURNAME/FAMILY NAME*

\_\_\_\_\_  
*GIVEN NAME*

\_\_\_\_\_  
*MIDDLE NAME*

**INSTRUCTIONS:** Please fill up the form below.

*For PAP  
use only:*

*Applicant's Credentials*

[   ]

**1. Active Associate or Fellow of the PAP**

Indicate current status:

\_\_\_\_\_ Associate

\_\_\_\_\_ Fellow

[   ]

**2. Educational Requirements:**

2.a Educational Attainment.

*Indicate Relevant degree earned:*

A Master of Arts or PhD in psychology with major / specialization in:

\_\_\_\_\_ Developmental Psychology

\_\_\_\_\_ Family Psychology

\_\_\_\_\_ Human Development

\_\_\_\_\_ Behavioral Development

\_\_\_\_\_ Family Life and Child Development

\_\_\_\_\_ Educational Psychology

\_\_\_\_\_ Counseling Psychology

\_\_\_\_\_ other (pls specify) \_\_\_\_\_

*(Please submit original or authenticated transcript of records in Annex A)*

[   ]

2.b. Coursework

Indicate which graduate courses taken:

\_\_\_\_\_ 3 units of an advanced level course in Developmental Psychology or Human Development

\_\_\_\_\_ 9 units of specialized courses on a specific period in the life span (i.e., infancy, child, adolescent, or adult development), and/or, a specific aspect of development (i.e., cognitive, social, emotional, behavioral, or physical)

\_\_\_\_\_ 6 units of Methods courses

\_\_\_\_\_ A thesis or culminating project on a topic in the area of Developmental Psychology

List graduate level courses taken:

<i>For PAP use only:</i>	<i>Requirements</i>	<i>Applicant's Credentials</i>
[ ]	<p><b>3. Developmental Psychology Experiences (for those who do not meet educational requirement)</b> Summarize relevant professional experience research, publication, and practice in areas that are pertinent to Developmental Psychology</p>	
[ ]	<p><b>4. Professional Development</b> Indicate total number of professional development activities in last three years</p>	
[ ]	<p><b>5. Good Moral Character.</b> Evidence that you have not been convicted of any civil, criminal, or administrative offense, or of ethical violation related to the professional practice of psychology. Indicate document submitted in Annex D.</p> <p>_____ NBI clearance (for those not employed) _____ Certification of Employer (for those employed)</p>	

*\*Please refer to the Primer on Certification of Psychology Specialist for other general and specific guidelines.*

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*Printed Name and Signature of Applicant*