American Board of
Clinical Child and Adolescent Psychology (ABCCAP)

EXAMINATION MANUAL FOR
BOARD CERTIFICATION IN

CLINICAL CHILD AND ADOLESCENT PSYCHOLOGY

FOR THE
AMERICAN BOARD OF PROFESSIONAL PSYCHOLOGY

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I. INTRODUCTION

The American Board of Clinical Child and Adolescent Psychology (ABCCAP) is a member Specialty Board of the American Board of Professional Psychology (ABPP). The examination in Clinical Child and Adolescent Psychology, for board certification by ABCCAP, certifies that the successful candidate has completed the educational, training, and experience requirements of the specialty, including a performance examination designed to assess the competencies required to provide quality services in the specialty of Clinical Child and Adolescent Psychology.

The primary objective of the ABCCAP is to establish a board certification process that recognizes, certifies, and promotes specialty level standing in the field of Clinical Child and Adolescent Psychology. Specialty level standing is conceptualized as higher than the basic level of competence certified by jurisdictional licensure, but within the reach of most experienced practitioners of professional psychology.

The ABCCAP expects that most Clinical Child and Adolescent psychologists should qualify for board certification following three years of post-doctoral training or equivalent experience.

Board Certification by ABCCAP assures the public that the individual has successfully completed the educational, training, and experience criteria of the specialty of Clinical Child and Adolescent Psychology, including an examination designed to assess the nine areas of competence (five functional competencies and four foundational competencies) stipulated in this manual that are required to provide specialty level practice.

Functioning at the Board Certified level reveals a quality of advanced preparation and professional level focus on the part of the psychologist. With three or more years of professional experience following the internship year, the licensed psychologist is able to qualify for board certification in Clinical Child and Adolescent Psychology. Qualifying for board certification requires that the person is competent in the relevant science base and its application in assessment, intervention, consultation, and/or supervision/management and that the individual has a clear awareness of interpersonal interactions, individual and cultural diversity, ethics and legal foundations, and professional identification as they impact professional functioning.

If a candidate has any questions regarding specialty eligibility, he or she is welcome to contact the ABCCAP for an informal review of credentials prior to submitting a complete application.

CERTIFICATION PROCESS: BRIEF OVERVIEW

Following attestation by the ABPP Central Office of the doctoral degree, licensure, and professional standing (i.e., absence of current disciplinary actions), the application is forwarded to the ABCCAP Credentials Reviewer for specialty review. The Board of Trustees of the ABPP sets and verifies minimum generic standards for candidacy. The Board of Directors of ABCCAP sets and verifies minimum specialty standards for Clinical Child and Adolescent Psychology. Once a person’s credentials have been approved, a Practice Sample is submitted to the Exam Coordinator. The Candidate’s Examination Committee reviews Practice Samples for substantive...
adequacy to determine the Candidate’s eligibility to sit for the Oral Examination. The same three-member Committee who approves the Practice Sample conducts the Oral Examination. The Oral Examination emphasizes the Candidate’s Practice Sample and competencies in both functional competencies (science base and practice, assessment, intervention, consultation, and supervision/management) and foundational competencies (interpersonal interactions, individual and cultural diversity, ethics and legal foundations, and professional identification).

Board Certification is achieved by successful completion of an examination, including both review of a document and an oral portion conducted by three or more members of an examination committee comprised of board certified Clinical Child and Adolescent Psychologists. Candidates should expect the examination to cover Clinical Child and Adolescent Psychology competencies, as well as their own practice of psychology. See Form A.

CANDIDATES WHO OBTAIN BOARD CERTIFICATION WILL RECEIVE 10 CONTINUING EDUCATION CREDITS. THE ABPP IS APPROVED BY THE AMERICAN PSYCHOLOGICAL ASSOCIATION TO SPONSOR CONTINUING EDUCATION FOR PSYCHOLOGISTS. THE ABPP MAINTAINS RESPONSIBILITY FOR THIS PROGRAM AND ITS CONTENT.

II. ELIGIBILITY FOR CANDIDACY AND SPECIALTY SPECIFIC REQUIREMENTS

Applicants submit the following education and training accomplishments to the ABPP Central Office to establish completion of the professional accomplishments listed below. Of note, if a candidate does not meet specific requirements for the ABCCAP, they might meet requirements for another board.

GENERICA DEGREE AND PROGRAM REQUIREMENTS

- A doctoral degree from a program in professional psychology which at the time the degree was granted, was accredited by the APA or the Canadian Psychological Association (CPA), OR

- A doctoral degree, which at the time the degree was granted, was from a program listed in the publication: Doctoral Psychology Programs Meeting Designated Criteria

OR THE DEGREE REQUIREMENT CAN BE MET IF:

- The applicant holds a current Certificate of Professional Qualifications in Psychology (CPQ) from the Association of State and Provincial Psychology Boards (ASPPB), OR

- The applicant holds a doctoral degree in psychology and has subsequently completed the requirements of a formal, doctoral level, professional program that
meets the APA accreditation requirements in clinical, counseling, or school psychology (re-training, often referred to as respecialization); OR

- The applicant qualifies for an individualized exception review. Individualized exception reviews are available for degrees granted outside the U.S. or Canada, doctoral degrees granted prior to 1983, or for applicants claiming equivalent doctoral degree and program requirements. Such exceptions are coordinated through the ABPP Executive Office and the appropriate specialty board.

**LICENSURE/CERTIFICATION REQUIREMENTS**

- All ABPP candidates in the U.S., its territories or Canada must be licensed as a psychologist for independent practice at the doctoral level in a jurisdiction in the U.S., its territories or Canada.

**SPECIALTY SPECIFIC PROGRAM REQUIREMENTS**

- In addition to the generic foundation requirements delineated above, the Clinical Child and Adolescent Psychology specialty requires completion of an organized doctoral education and training program in Clinical Child and Adolescent Psychology, which includes an internship. The specialty also requires postdoctoral supervised practice and experience in the specialty. The specialty’s specific program requirements are met if:
  - The doctoral degree program was in Clinical Psychology, either a child/adolescent track, or a specialized child/adolescent program, from a program accredited by the APA or CPA OR
  - The doctoral degree program qualifies as equivalent to an APA or CPA accredited program in Clinical Child and Adolescent Psychology as determined by the ABCCAP. This option is particularly applicable to degrees awarded throughout the U.S. or Canada OR
  - The original doctoral degree is from a nonprofessional program in psychology, but the applicant has completed at least a two year doctoral level retraining program designed to meet APA or CPA accreditation requirements in professional psychology (clinical, school, or counseling) with significant child and adolescent focus (as noted above) OR
  - The doctoral degree program was in a counseling or school psychology program accredited by the APA or CPA (see additional experience requirements in the post-doctoral section below).

**INTERNSHIP REQUIREMENTS**

- A one-year full-time or two-year half-time internship program is required. Two-thirds of this training should focus on child/adolescent populations. The internship requirement is met if:
  - Accredited by the APA or CPA
• Listed in the Association of Psychology Postdoctoral and Internship Centers (APPIC) Directory for the year the internship was completed

POSTDOCTORAL PRACTICE EXPERIENCE AND SUPERVISION REQUIREMENTS

By its nature, the specialty of Clinical Child and Adolescent Psychology denotes a level of practice requiring preparation beyond doctoral requirements. Specifically, (as of November 1, 2013) a minimum of THREE years of post-degree experience is required.

The postdoctoral requirements include the following for individuals whose degree is from an APA or CPA accredited program in Clinical Child and Adolescent Psychology:

• **two years** of supervised postdoctoral experience in Clinical Child and Adolescent Psychology in a formal postdoctoral training program in Professional Psychology that is accredited by the APA or CPA or from an APPIC member program, **plus one** additional year of work in the field

OR

• **one year** of supervised postdoctoral practice experience consistent with that ordinarily associated with Clinical Child and Adolescent Psychology, of which a minimum of one hour per week of supervision was conducted face-to-face by a licensed psychologist, **plus two** additional years of work in the field

• Any variance from the above two scenarios will be decided on a case-by-case basis by the Credentials Reviewer in consultation with the Board.

The postdoctoral requirements include the following for individuals whose degree is from an APA or CPA accredited program in Counseling or School Psychology or a Combined Program, or have a doctoral degree in professional psychology from a program listed as a designated doctoral program in psychology by ASPPB/NRSPP:

• five years postdoctoral experience as a Clinical Child and Adolescent Psychologist. One of the five years must have been supervised for a minimum of one hour per week (preferably two hours, one of which can be group supervision) by a Clinical Child and Adolescent Psychologist,

OR
• successful completion of two-years in an APA accredited or APPIC member postdoctoral residency/fellowship program in clinical child/adolescent psychology

AND

• demonstrates self-identification as a Clinical Child and Adolescent Psychologist and an expected continued identification with the specialty.

SENIOR PSYCHOLOGIST OPTION

Psychologists who meet the above degree, internship, and postdoctoral criterion, AND have 15 years or more of postdoctoral (i.e., post-degree) experience are eligible for the Senior Psychologist option. The aim of this program is to bring into ABCCAP senior colleagues who have made a contribution to our field.

III. DEFINITION OF CLINICAL CHILD AND ADOLESCENT PSYCHOLOGY

SERVICES

Clinical Child and Adolescent Psychology is both a general practice and a health service provider specialty in professional psychology. Clinical Child and Adolescent Psychologists provide professional services relating to the diagnosis, assessment, evaluation, treatment and prevention of psychological, emotional, psychophysiological and behavioral disorders in children and adolescents. These services include procedures for understanding, predicting, and alleviating intellectual, emotional, physical, psychological, social and behavioral maladjustment, and mental illness, as well as other forms of discomfort. In addition, it includes services for the enhancement of functioning in all of these areas.

Services provided by Clinical Child and Adolescent Psychologists that are evaluated as part of the ABCCAP exam include the following functional competencies:

• Assessment (evaluation, diagnosis, formal psychological testing)
• Intervention (treatment, prevention)
• Consultation with others professionals in diverse settings
• Supervision and/or management activities (e.g., program development, administration)

Satisfactory performance in science base and application, another functional competency, must be demonstrated throughout the entire examination process. While teaching is a valid functional competence, it is not included in the ABCCAP exam.

It is expected that Clinical Child and Adolescent Psychologists will display competence in foundational competencies (i.e., interpersonal interactions, individual and cultural diversity, ethics and legal foundations, and professional identification) across any functional competency in which they work (i.e., science base and practice, assessment, intervention, consultation, supervision/management, teaching). In this manual, we will use the terms multicultural and
individual/cultural diversity interchangeably. Individual and cultural diversity recognizes the broad scope of such factors as: race, ethnicity, language, sexual orientation, gender, age, disability, class status, education, religion/spiritual orientation, and other cultural dimensions.¹

COMPETENCIES CHARACTERISTIC OF THE SPECIALTY OF CLINICAL CHILD AND ADOLESCENT PSYCHOLOGY

The ABCCAP examination process assesses functional and foundational competencies. These domains are described below.

FUNCTIONAL COMPETENCIES

Science Base and Application

**NOTE: Satisfactory performance in science base and application must be demonstrated throughout the entire examination process.**

A successful Candidate is aware of and conversant with scientific and scholarly developments in Clinical Child and Adolescent Psychology and applies them in professional practice. Examiners explore the Candidate’s awareness of and ability to discuss critically the implications and applications of contemporary knowledge in the practice of Clinical Child and Adolescent Psychology. This includes knowledge of the integration of theory, research, and practice concerning interpersonal interactions, issues of individual/family and cultural diversity (e.g., ethnicity, race, gender, age, sexual orientation, disability status, and special populations¹), ethics and legal foundations, and professional identification. If applicable, attention is paid to the Candidate’s own scholarly contributions as they inform the practice of clinical child and adolescent psychology.

Assessment

A successful Candidate conducts assessments that can range from the administration and interpretation of standardized tests to behavioral observations and clinical interviews. Assessment cases come from appropriate developmental levels. In some forms of professional practice, assessment and intervention are integral parts of the same process. Examiners explore the Candidate’s level of sophistication in discussing choice of assessment methods or approaches to address diagnostic issues and/or case formulation consistent with whatever theoretical foundation and evidence base is proposed as guiding assessment work. Attention is paid to interpersonal interactions, individual and cultural diversity, ethics and legal foundations, and professional identification as related to assessment.

Intervention

A successful Candidate performs interventions that may take the form of any modality of psychological treatment or environmental modification. Intervention cases may come from any

appropriate developmental level. In some forms of professional practice, assessment and intervention are integral parts of the same process. Examiners explore the Candidate’s level of sophistication in discussing choice of therapeutic or environmental interventions to address therapeutic or family/systemic/organizational issues consistent with whatever theoretical foundation and evidence base is proposed as guiding intervention work. Attention is paid to interpersonal interactions, individual and cultural diversity, ethics and legal foundations, and professional identification as related to intervention.

**Consultation**

A successful Candidate demonstrates the ability to communicate and apply his/her knowledge in consultation with others such as other persons who provide psychological services, health care professionals from other disciplines, educational/school personnel, social service agencies, rehabilitation centers, industry, legal systems, public policy makers, and individuals in other institutions and settings. Clinical Child and Adolescent Psychologists, additionally, consult regarding research. Attention is paid to interpersonal interactions, individual and cultural diversity, ethics and legal foundations, and professional identification as related to consultation.

**Supervision/Management**

With regard to Supervision, a successful Candidate demonstrates the ability to communicate and apply his/her knowledge in supervision with others such as psychological technicians/assistants; psychometricians; other persons who provide psychological services; psychology trainees in practicum, internship, and postdoctoral settings; and individuals conducting research. With regards to Management, a successful Candidate demonstrates the ability to effectively carry out administrative activities and/or program design, implementation, and evaluation.

In addition to the functional competencies described above, four foundational competencies are evaluated as they apply to all functional competencies evaluated. The foundational competencies are described below and include: interpersonal interactions, individual and cultural diversity, ethical and legal foundations, and professional identification.

**FOUNDATIONAL COMPETENCIES**

**Interpersonal Interactions**

A successful Candidate demonstrates sensitivity to the welfare, rights, and dignity of others and an ability to relate to clients/patients and others in ways that enhance the effectiveness of services provided. Successful Candidates must be aware of their own impact on others and countertransference vulnerabilities. They must indicate awareness of relevant issues regarding boundaries, communication styles, and professionalism.

**Individual and Cultural Diversity**

A successful Candidate demonstrates awareness of all aspects of individual and cultural diversity (e.g., ethnicity, race, gender, age, sexual orientation, disability status, and special populations) as
these influence their understanding of assessment, intervention, consultation, supervision/management, the science base and its application, and interpersonal interactions. Successful Candidates convey awareness of their own individual and cultural diversity characteristics as these influence functioning across functional competencies and interpersonal interactions.

**Ethical and Legal Foundations**

A successful Candidate is aware of: (1) current ethical principles and practice guidelines of the APA; (2) current statutory and regulatory provisions applicable to professional practice; and (3) implications of these principles to protect clients/patients, the profession, and society.

**Professional Identification**

A successful Candidate identifies with the profession by appropriate memberships and involvement in international, national, state, or local professional organizations and by awareness of current issues facing the profession. The Candidate pursues continuing professional education commensurate with licensure requirements and professional development in the Specialty of Clinical Child and Adolescent Psychology. They seek consultation and supervision when necessary and engage in ongoing training and continuing professional education.

**IV. APPLICATION PROCESS**

**DISABILITY ACCOMMODATIONS**

The Board encourages qualified individuals with disabilities to apply for Specialty Board status. The Board recognizes that these individuals may encounter unusual difficulties and will make efforts to provide reasonable accommodations for these applicants. The Board will consider individual requests for accommodations by qualified applicants with disabilities. A qualified individual with disabilities can request reasonable accommodation, must formalize the request with the Board, and support the request with documentation confirming a need for reasonable accommodation and the basis of the need. At the request of the Board, applicants with special needs should be ready to document the need consistent with the ABCCAP guidelines, and assist the Board in developing reasonable accommodations, as necessary. In its sole discretion, the Board will either grant or deny the request based on ABCCAP guidelines.

General information regarding ABCCAP guidelines for accommodations are contained within the ABCCAP document entitled Qualifications for Testing Accommodations for Applicants with Disabilities (see Appendix I, page 40) and in the application forms, ABCCAP Application for Testing Accommodations (see Appendix J, page 42). Both the guidelines and the application itself may be found in the Appendices to this manual or downloaded from the ABPP website (www.abpp.org).

**APPLICATION**

The Applicant submits the Application for Specialty Certification in Clinical Child and Adolescent Psychology using the forms available at www.abpp.org. The fee and credentials
materials are submitted to the ABPP Central Office. ABPP verifies the degree, the license, professional standing (i.e., disciplinary status), the internship and the generic postdoctoral requirements. If generic requirements are satisfied, materials are forwarded by the ABPP Central Office to the ABCCAP Credentials Reviewer for evaluation of specialty requirements. If no decision can be reached, the Applicant may be asked for additional information. Final determination is sent to ABPP Central Office and the Applicant is advised of the outcome by ABPP Central Office.

If the credentials review is successful, the Candidate then enters the Phase 1 Practice Sample Review component of the Examination Process and begins preparation of Practice Samples. Three copies of the Practice Samples must be received by the Exam Coordinator within 12 months of acceptance into candidacy. If the Exam Coordinator does not receive a complete packet of materials within 12 months of acceptance into candidacy, the applicant and ABPP Central Office will be notified by the Exam Coordinator and the applicant must reapply for candidacy.

The Practice Sample Review fee is submitted directly to the ABPP Central Office by the Candidate. Upon confirmation of receipt, the Candidate submits three copies of the Practice Sample to the Exam Coordinator, who reviews it for completeness. If technical inadequacy or deficiency is detected in the recorded materials, the Candidate will be asked for typed verbatim transcripts or for an entirely new Practice Sample. Once the Practice Sample is deemed as complete, the Exam Coordinator, guided by the Candidate’s Professional Statement, selects a tentative Chair and two Board Certified Psychologists for the Examination Committee and informs the Candidate. The Candidate is given the opportunity to state if he or she is has a conflict of interest with any member of the Exam Committee. If no conflict is determined, the Committee is confirmed and Practice Samples are sent to committee members, who oversee the examination process. The three team members review the Practice Sample to determine whether or not the person passes this Practice Sample step and can be scheduled for the Oral Examination. If the Candidate passes the Practice Sample step, the Chair notifies ABPP Central Office and the candidate. At that time, the Candidate must send the Oral Examination fee to the ABPP Central Office before an examination date can be finalized. If additional information is required from the Candidate, the Exam Chair requests this information from the Candidate. The Candidate has 90 days to supply the requested information. If the Practice Sample is unacceptable, the Candidate is notified about the reasons and the examination process is halted. All committee members are required to return the materials to the Chair, who in turn, returns them to the Candidate. The Candidate may submit a new examination fee to ABPP Central Office and new Practice Samples to the ABCCAP Exam Coordinator within six months, and the examination process continues. The process described above is captured in the flow chart below. 

Candidates are notified of the Oral Examination outcome within one week of taking the examination. If the Candidate passes, they can immediately use the title: Board Certified Clinical Child and Adolescent Psychologist.

The new Board Certified Clinical Child and Adolescent Psychologist is encouraged to participate in the evolution and administration of the ABCCAP Examination process.
Specialty certification in Clinical Child and Adolescent Psychology requires an initial credentials review, evaluation of specialty practice work samples (redacted), and an oral examination.

Candidate files initial application with ABPP Central Office with $325 application fee

After passing general review, Central Office sends credentials to ABCCAP Credentials Reviewer

Central Office notifies candidate of credentials pass, requests $250 practice sample review fee

Credentials Reviewer notifies Exam Coordinator and Central Office of specialty credentials pass

ABCCAP Credentials Reviewer evaluates candidate's credentials for the specialty area

Candidate submits $250 practice sample review fee to Central Office and sends samples to Exam Coordinator

Exam Coordinator documents receipt of samples from candidate and Central Office's receipt of practice sample review fee

Exam Coordinator identifies Exam Chair plus two Exam Committee Members; verifies no conflict of interest with candidate; and sends practice samples to Exam Committee

Candidate submits $450 Oral exam fee to Central Office

Exam Chair notifies Exam Coordinator and Central Office of passed practice samples

Exam Coordinator documents payment date and authorizes Exam Chair to schedule oral exam

Exam Committee holds oral exam at a mutually convenient time and location

Exam Committee reviews practice samples

The oral exam emphasizes the applicant's practice samples, the applicant's knowledge of current issues in professional psychology, professional experience, awareness of the scientific basis of clinical child practice, clinical judgment, awareness of diversity issues and sensitivity to ethical, professional, and legal standards of practice.

Central Office notifies the candidate of her/his ABPP Specialty Certification

Exam Chair notifies Exam Coordinator and Central Office of passed oral exam
V. PRACTICE SAMPLES

The Curriculum Vitae and Professional Statement provide the Candidate the opportunity to communicate about him/herself as a Clinical Child and Adolescent Psychologist and serve as a basis for discussion in the Oral Examination. The Curriculum Vitae and Professional Statement are required for all Candidates. Individuals applying under the Regular Option will submit two recorded practice samples with accompanying documentation as described below. Individuals applying under the Senior Psychologist Option will submit two practice samples but are not required to provide recorded material. In each case, practice samples should come from two of the following functional competencies: assessment, intervention, consultation, and supervision/management. The same client/patient cannot serve as the basis for both Practice Samples. For detailed information on the requirements for the Practice Samples, see Forms C-1 - D-6.

Three copies of the following materials are required.

CURRICULUM VITAE

All Practice Samples must include a Curriculum Vitae detailing the Candidate’s professional contributions. The Curriculum Vitae must include educational and training background, professional roles and responsibilities, and professional contributions (e.g., service activities, publications, presentations, grants).

PROFESSIONAL STATEMENT

The Professional Statement (no more than 10 double-spaced, typewritten pages) must address in separate sections each of the following items (See Form D for more details):

1) Description of current professional work (employment and professional activities at the local, state, and national level), continuing professional education activities, long-term plans in psychology, and reasons for seeking board certification;
2) Summary of the two submitted Practice Samples (for regular applicants) or a summary of primary functional competencies (for senior applicants) that includes a description of the theoretical and empirical bases for these activities;
3) Discussion of the evidence base that informs one’s practice as a Clinical Child and Adolescent Psychologist;
4) Examples of handling of complex interpersonal interactions in the functional competencies of assessment, intervention, consultation, and/or supervision/management;
5) Examples of awareness of individual and cultural diversity as pertinent to one’s assessments, interventions, consultations, and/or supervision/management;
6) Description of a meaningful and challenging ethical dilemma personally encountered, aspects of the APA Ethical Principles of Psychologists and Code of Conduct pertinent to the dilemma, and how the dilemma was managed;
7) Attestation that no ethical/legal action has been taken against Candidate since candidacy.

REQUIRED FORMS

Blank copies of the Informed Consent and Health Information Portability and Privacy Act (HIPPA) documents used in the Candidate’s practice setting(s).

REGULAR OPTION PRACTICE SAMPLES

The Practice Samples are two recordings (e.g., DVDs, videotapes) of professional work representative of the Candidate’s current practice, each approximately 50 minutes in length. These recordings should be made no more than one year prior to the submission. The Candidate may select to provide Practice Samples reflecting two of the following functional competencies: assessment, intervention, consultation, and/or supervision/management. The recorded Practice Samples will depict two of the following: (1) an unrehearsed psychological assessment or evaluation; (2) an unrehearsed intervention (any modality) drawn from typical clinical practice; (3) an unrehearsed consultation in any context drawn from typical practice; or (4) an unrehearsed demonstration of clinically relevant supervision or management activities. It is not acceptable to provide two samples of the same functional competency (e.g., two assessment samples).

An Assessment Practice Sample may include psychological testing or an intake evaluation. If the Assessment Practice Sample includes test administration, the recording must be that portion during which rapport building, interviewing and/or provision of feedback takes place. A recording solely depicting test administration is not satisfactory unless the test is a semi-structured interview, such that the specific administration requires significant clinical sophistication (e.g., ADOS). Where standardized assessment instruments are used, the Candidate should demonstrate a thorough knowledge of the construction, administration and interpretation of such instruments. Note that formal testing is not required for an Assessment Practice Sample.

An Intervention Practice Sample may include an example of ongoing therapy. An in-depth assessment feedback session may also be used, unless a feedback session is used for the Assessment Practice Sample, in which case the Intervention Practice Sample must reflect a different type of intervention. The Candidate may be queried as to how he/she handled the issues of confidentiality, informed consent, and privacy with the client/patient.

A Consultation Practice Sample may include an example of a clinical consultation.

A Supervision/Management Practice Sample may include a demonstration of performance in supervision or management activities.

The two Practice Samples cannot use the same client/patient and they must reflect different aspects of the Candidate’s practice. Both samples must include copies of all source documents and contextual statements that contain the information described in C2-C5. Each written Practice Sample should be 1000-1500 words in length.
Candidates are encouraged to submit recordings that reflect their competence and expertise (typical rather than exemplary situations are expected) and that depict their interactive style in their professional context(s).

The recordings shall continuously provide audible interactions between the Candidate and the other participant(s) (e.g., client/patient, colleague) and depict visible interactions, preferably between the Candidate and other participant(s), but in all cases at least the Candidate. **Good audio and video quality is essential.** If a recording has moments of lowered audio quality, the Candidate should submit a typed verbatim transcript, clearly marked to show those areas of lowered audio quality.

Participant consent forms (Form E or the equivalent) **must** be obtained by the Candidate and maintained for his/her case records. **Candidates must send a brief attestation that written informed consent was secured.**

Candidates should take great care to remove all identifiers from all printed materials, including test protocols. It is not necessary to delete identifying information from the AV material, which will be held in confidence by the examiners and returned to the examinee at the end of the exam.

**SENIOR OPTION PRACTICE SAMPLES**

Psychologists who qualify for the Senior Option must submit a Curriculum Vitae and Professional Statement as delineated above. In addition, the Senior Candidate must include two or more of the following: professional publications, brochures, outlines, presentations, or portfolios that demonstrate functional competence in assessment, intervention, consultation, and/or supervision/management related to the practice of clinical child and adolescent psychology. As with regular option candidates, the two practice samples must reflect two different areas of functional competence. Specifically, Candidates qualifying as seniors may provide information reflecting more distinctive practice patterns resulting from extended professional experience, e.g., areas of consultation; contracted service responsibilities; special grants; program administration/supervision; graduate school, internship, or residency program contributions, involvement, or clinical level teaching; Continuing Professional Education program presentations; program evaluation or research, professional publications related to the practice of the specialty; or the organization and pattern of the Candidate’s current clinical practice.

Please note that recorded Practice Samples are not required for the Senior Psychologist Option, but the Candidate should be prepared to discuss the following functional competencies: science base and application, assessment, intervention, consultation, and supervision/management. See Form C-6.
VI. ORAL EXAMINATION

SCHEDULING

ABCCAP holds oral examinations as needed and in conjunction with meetings of the Board of Directors and throughout the year at various national meetings.

CANDIDATE’S MATERIALS

The candidate may bring a copy of his/her Practice Sample to the Oral Examination; however, no additional materials (e.g., APA Ethical Principles, psychometric notes about tests administered) may be brought into the room.

SCHEDULE SUMMARY

To assure standardization of the examination process, the ABCCAP has established the following Oral Examination Schedule. The general pace and sequence of topics provide guidelines to minimize the possibility that Candidates might receive differential treatment. The Oral Examination process is designed to be completed in approximately three hours. It is a competency-based examination and the Examination Committee is expected to explicitly address functional and foundational competencies with the Candidate. Within each segment, there is room for variation according to the judgment of the Examination Committee. Many topics will be interwoven throughout the examination, and flexibility should be allowed if relevant to the discussion. A topic may receive more cursory exploration in its scheduled time period if it has been sufficiently covered earlier. It often is useful to utilize hypothetical examples or situations to ascertain if the individual meets the criterion for passing each functional and foundational competency. The Oral Examination process should be collegial in nature. The result is forwarded to ABPP Central Office using the on-line link found on the ABPP website.
**SCHEDULE SUMMARY FOR ORAL EXAMINATION**

<table>
<thead>
<tr>
<th>Activity</th>
<th>Approximate Time allotted (min.)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Team Meets and Organizes</strong></td>
<td>10</td>
</tr>
<tr>
<td><strong>Team Greets Candidate:</strong> Each team member introduces self, time frame is explained, and the fact that the exam is competency-based is highlighted. The collegial nature of the process is indicated.</td>
<td>10</td>
</tr>
<tr>
<td><strong>Examination of Practice Sample:</strong> Curriculum Vitae, Professional Statement, Practice Samples (Explicitly cover all five <strong>functional competencies</strong> [science base and application, assessment, intervention, consultation, and supervision/management] as well as the four <strong>foundational competencies</strong> [interpersonal interactions, individual and cultural diversity, ethics and legal foundations, and professional identification]).</td>
<td>90</td>
</tr>
<tr>
<td><strong>Break:</strong> THE CANDIDATE SHOULD NOT BE ASKED TO DO ANY WORK DURING THIS TIME</td>
<td>10</td>
</tr>
<tr>
<td><strong>Examination of Ethics and Legal Foundations:</strong> This must include:</td>
<td>45</td>
</tr>
<tr>
<td>(a) 10 minutes for the Candidate to review privately the selected ethical vignette;</td>
<td></td>
</tr>
<tr>
<td>(b) discussion of the Candidate’s responses to this ethical vignette;</td>
<td></td>
</tr>
<tr>
<td>(c) discussion of the ethical vignette provided by the Candidate in the Professional Statement;</td>
<td></td>
</tr>
<tr>
<td>(d) confirmation that no ethical or legal action has been taken against the Candidate since submission of Practice Sample.</td>
<td></td>
</tr>
<tr>
<td>A second vignette may be given if needed to assess ethical competence.</td>
<td></td>
</tr>
<tr>
<td>Additional time can be spent to further clarify competence in any of the functional and/or foundational competencies.</td>
<td></td>
</tr>
<tr>
<td><strong>Exam Wrap-up and Discussion:</strong></td>
<td>5</td>
</tr>
<tr>
<td>(a) Ask if there is more information the Candidate would like to provide about any functional or foundational competency;</td>
<td></td>
</tr>
<tr>
<td>(b) Solicit feedback about the examination process;</td>
<td></td>
</tr>
<tr>
<td>(c) Remind the Candidate they can provide feedback directly to ABPP if desired;</td>
<td></td>
</tr>
<tr>
<td>(d) Inform the Candidate that CE credits will be provided if the exam is passed;</td>
<td></td>
</tr>
<tr>
<td>(e) Remind the Candidate notification of results comes from CO;</td>
<td></td>
</tr>
<tr>
<td>(f) Return Practice Samples to Candidate.</td>
<td></td>
</tr>
<tr>
<td><strong>Team Votes, Completes Forms, and Writes Report if necessary</strong></td>
<td>10-25</td>
</tr>
</tbody>
</table>

**Note:** Time allotments are guidelines to be followed reasonably closely. Significant variations from the exam format or schedule must be by mutual agreement between Candidate and Chair and documented in a written statement describing the variations and stipulating that they shall NOT serve as grounds for the appeal of a failed examination. Both the Candidate and Chair will sign the statement.
ETHICS VIGNETTES

A file of prepared vignettes is maintained to standardize the Ethics segment of the Oral Examination. One or two vignettes are selected. When possible, choose a vignette(s) applicable to the Candidate’s practice setting. Otherwise, vignettes may be selected on a random basis. Three copies, with points to be addressed, are distributed by the Examination Committee Chair to Committee members, and one, without important points, is to be given to the Candidate after the exam break. The Candidate has also submitted, in the Professional Statement, a non-identifying ethics quandary from his/her own professional experience.

The Examining Committee does not necessarily expect a “right” answer, but anticipates that the Candidate will present relevant options and demonstrate the ability to thoughtfully weigh them in the light of the APA ethics principles, professional practice standards, and relevant statutes. The Candidate will discuss his/her own vignette in the same manner.

No outside materials can be used to aid the Candidate during this section of the Oral Examination.

At the conclusion of the Oral Examination, all copies of the Ethics vignettes are collected by the Chair to maintain confidentiality. The use of each vignette will be tracked so that in the case of a Candidate’s failure, a new vignette will be used for re-examination.

Examiners and Candidates will treat the vignettes as confidential.

VII. ABCCAP EXAMINATION TEAM

TEAM COMPOSITION

The Examination Committee is a committee of three Board Certified examiners, one of whom serves as Chair. No committee member may have had any significant prior or current personal, professional, or administrative relationship with the Candidate or the clients/patients in the Practice Samples.

The ABCCAP recognizes that specialists in Clinical Child and Adolescent Psychology use a variety of approaches and techniques and have differing conceptual frames of reference. ABCCAP also recognizes that the effectiveness of professional practice is a function of many factors, including personal factors, assessment and intervention strategies, level of experience and theoretical understanding. The Examination Committee Chair and Member Examiners will be selected with consideration of the theoretical orientation, knowledge base, professional interest and experience expressed in the Candidate’s Professional Statement. However, the theoretical orientation of the committee members is not a basis for appeal. The Chair will inform the Candidate of the tentative choices for the Examination Committee. The Candidate has one week from notification to raise any concerns or objections about the proposed Examination Committee to the Chair. If the Candidate does not contact the Chair within one week, it will be assumed the proposed Examination Committee is acceptable.
VIII. SCORING CRITERIA

COMPETENCY AREAS

The following competency areas of professional functioning constitute the examination.

FUNCTIONAL COMPETENCIES
SCIENCE BASE AND APPLICATION must be demonstrated across the following functional competencies:
ASSESSMENT
INTERVENTION
CONSULTATION
SUPERVISION/MANAGEMENT

FOUNDATIONAL COMPETENCIES
INTERPERSONAL INTERACTIONS
INDIVIDUAL AND CULTURAL DIVERSITY
ETHICS AND LEGAL FOUNDATIONS
PROFESSIONAL IDENTIFICATION

SCORING CRITERIA FOR THE COMPETENCIES

Important anchored criterion components for each functional and foundational competency appear below. **Candidates need not receive a pass in each component of a competency area, but must be judged as a pass in the overall competency area.** In other words, a Candidate need not manifest all of the illustrative “passing” behaviors in a functional or foundational competency to obtain a pass in that domain. A Candidate could manifest one of the component “failing” level behaviors, but still be found to pass in the overall competency. The significance and weight of any one “failing” behavior must be determined by each Examiner. **If the Candidate’s functioning is midway between passing and failing and cannot be identified as being either passing or failing, then the Candidate passes that area.**

An examiner may give a pass in a given functional or foundational competency during the Practice Sample Review, but may give a fail for that same practice or foundational competency during the Oral Examination as a result of information derived during the oral examination process.

CRITERION EXAMPLES OF COMPETENCIES:

FUNCTIONAL COMPETENCIES:

1) SCIENCE BASE AND APPLICATION

Components:

a. Use of evidence-base and theory to inform activities as a Clinical Child and Adolescent Psychologist. This involves having a definable set of constructs and a theoretical orientation of sufficient complexity to allow a rich discussion.
b. Critical evaluation of research and professional literature and capacity to discuss implications for practice.
c. Contribution to empirical knowledge base (not a required component, but should be evaluated if relevant to the candidate).
d. Attention to interpersonal interactions, individual and cultural diversity, ethics and legal foundations, and professional identification as related to the application of the science base to practice.

**Passing Level Examples:**
- Demonstrates awareness of research and other publications relevant to his/her practice and presents a coherent and reasonably comprehensive explanation based on research and theory of client/patient behavior and functioning as a Clinical Child and Adolescent Psychologist in each practice domain.
- Demonstrates the capacity to thoughtfully evaluate the extant evidence base and to use this assessment to inform one’s practice.
- Shows an ability to contribute to the existing knowledge base (if applicable).
- Demonstrates awareness of interpersonal interactions, individual and cultural diversity, ethics and legal foundations, and professional identification as related to the application of the science base to practice and the contribution to the science base.

**Failing Level Examples:**
- Provides explanations of client/patient behavior that may be accurate, but that lack support and/or omit obviously useful theoretical and research constructs.
- Presents as largely unaware of current research or theory or has an inaccurate reading of the pertinent literature (NOTE: It is not expected that Candidates can cite specific years of citations or similar levels of detail; the Candidate is expected to be aware of major trends in the field).
- Does not meaningfully contribute to the existing knowledge base (if applicable).
- Conveys a general lack of awareness of ways in which interpersonal interactions, individual and cultural diversity, ethical and legal foundations, and professional identification are pertinent the application of the existing science base.

2) **ASSESSMENT**

**Components:**

a. Assessment and evaluation procedures selected are evidence-based, appropriate for the referral question and for the specific client/patient.

b. Assessments and evaluations are conducted with a high level of skill and appropriate attitude using extant knowledge base.

c. Assessment and evaluation findings are interpreted accurately and used to inform conceptualization.

d. Assessment and evaluation data are applied to the development of recommendations.

e. Results are communicated in ways that lead to useful outcomes.

f. Attention to interpersonal interactions, individual and cultural diversity, ethics and legal foundations, and professional identification as related to assessment is evident.

**Passing Level Examples:**
• Chooses assessment and evaluation procedures that could, at least in theory, provide data to address the referral questions and that are appropriate, given the client’s/patient’s diversity status.
• Conducts assessments and evaluations in a competent fashion.
• Interprets assessment and evaluation data in a reasonably accurate and complete manner and uses these interpretations to guide case conceptualization.
• Creates recommendations with relevant findings considered.
• Communicates, both orally and in writing, findings from assessments and evaluations to the patient and other relevant parties in an understandable and useful fashion.
• Demonstrates attention to interpersonal interactions, individual and cultural diversity, ethics and legal foundations, and professional identification as related to assessment.

Failing Level Examples:
• Chooses procedures that restrict the examinee’s ability to respond appropriately to the referral questions, or are inappropriate for the client’s/patient’s diversity status.
• Does not conduct assessments and evaluations with adequate skill or appropriate attitude or does not build upon the extant knowledge base. Scores assessments inaccurately (if applicable).
• Provides interpretations and/or conceptualizations of assessment and evaluation data that are incomplete, contain errors, or do not guide conceptualization. Offers interpretations and conclusions that fail to take into account some aspect of the client/patient’s uniqueness (diversity status) and/or fail to take into account the client/patient’s environmental situation.
• Does not provide a clear link between assessment and evaluation findings and subsequent recommendations.
• Communicates assessment results in an unclear, disorganized or ambiguous manner; fails to anticipate foreseeable questions, provides inappropriate interpretations; and/or does not convey findings in a manner associated with useful outcomes.
• Conveys a general lack of awareness of ways in which interpersonal interactions, individual and cultural diversity, ethics and legal foundations, and professional identification are related to assessment.

3) INTERVENTION

Components:
• Intervention contract issues (client’s/patient’s goals, boundaries of treatment, payment resources, etc.) are managed responsibly.
• Intervention procedures chosen are evidence-based and appropriate for the client/patient situation.
• Interventions are applied with a high-quality level of skill and knowledge and appropriate attitude.
• Attention to interpersonal interactions, individual and cultural diversity, ethics and legal foundations, and professional identification as related to intervention are evident.

Passing Level Examples:
• Ascertains client/patient goals; deals with issues regarding payment arrangements appropriately; defines limits of confidentiality and boundaries of services clearly; conveys availability; and keeps records consistent with existing standards of care.
• Selects interventions that are evidence-based, appropriate to client’s/patient’s assessed goals, situation and resources.
• Implements interventions in a competent fashion.
• Demonstrates attention to interpersonal interactions, individual and cultural diversity, ethics and legal foundations, and professional identification as related to intervention.

**Failing Level Examples:**
• Ignores or does not adequately determine client/patient goals; mishandles payment arrangements; fails to address or clearly define limits of confidentiality and boundaries; does not convey information about availability; and fails to maintain acceptable standards of clinical record-keeping.
• Selects interventions that are not evidence-based and/or are inconsistent with the client/patient’s goals, situation or resources.
• Fails to consistently provide interventions that are thoughtful and of high quality and does not adequately communicate about interventions being provided.
• Conveys a general lack of awareness of ways in which interpersonal interactions, individual and cultural diversity, ethics and legal foundations, and professional identification are related to intervention.

4) **CONSULTATION**

**Components:**
a. Consultation procedures are selected in a fashion that is appropriate for the context.
b. Background information for the consultation is gathered appropriately and thoughtfully integrated.
c. Consultations are conducted with high-quality level of skill and knowledge and appropriate attitude.
d. Attention to interpersonal interactions, individual and cultural diversity, ethics and legal foundations, and professional identification as related to consultation are evident.

**Passing Level Examples:**
• Selects consultation procedures appropriate to the context and consistent with evidence for practice.
• Collects all information pertinent to the consultation and integrates this information in a thoughtful fashion.
• Conducts consultations in a competent fashion.
• Demonstrates attention to interpersonal interactions, individual and cultural diversity, ethics and legal foundations, and professional identification as related to consultation.
• Defines and understands the boundaries of the consultation contract/process.
• Demonstrates awareness of the laws relevant to the particular consultation (e.g., IDEA for public schools).
• Demonstrates awareness of systems issues relevant to the consultation (e.g., the management hierarchy in an industry).
Failing Level Examples:

- Selects consultation procedures that are not appropriate to the context or contradict existing evidence for practice.
- Fails to collect all information pertinent to the consultation and to integrate this information in a thoughtful fashion.
- Does not conduct consultations with adequate skill or appropriate attitude or do not build upon the extant knowledge base.
- Conveys a general lack of awareness of ways in which interpersonal interactions, individual and cultural diversity, ethics and legal foundations, and professional identification are related to consultation.
- Is not able to define and describe the boundaries of the consultation contract/process.
- Does not demonstrate awareness of the laws relevant to the particular consultation (e.g., IDEA for public schools).
- Does not demonstrate awareness of systems issues relevant to the consultation (e.g., the management hierarchy in an industry).

5) SUPERVISION/MANAGEMENT

Components:

a. Supervision is conducted using existing theory and research with a high level of skill and professional attitude.

b. Management activities are conducted using theory and research with a high level of skill and professional attitude.

c. Attention to interpersonal interactions, individual and cultural diversity, ethics and legal foundations, and professional identification as related to supervision/management are evident.

Passing Level Examples:

- Uses existing theory and research to conduct supervision with high quality skill and professional attitude.
- Uses existing theory and research to conduct management activities with high quality skill and professional attitude.
- Demonstrates attention to interpersonal interactions, individual and cultural diversity, ethics and legal foundations, and professional identification as related to supervision/management.
- Is attentive to the developmental process of supervision and adjusts supervision to meet the developmental level of the trainee
- Uses appropriate strategies to handle conflicts that arise in the supervisory relationship.
- Uses constructive feedback and remediation to address poor trainee performance.
- Is aware of the differences between supervision of a trainee and management of an employee.
- When managing employees from other disciplines, seeks consultation as appropriate to address discipline-specific issues.
- Is aware of systems issues relevant to his/her specific management setting and demonstrates skill in negotiating those systems issues.
Failing Level Examples:

- Fails to use existing theory and research to conduct supervision with high quality skill and professional attitude.
- Fails to use existing theory and research to conduct management activities with high quality skill and professional attitude.
- Conveys a general lack of awareness of ways in which interpersonal interactions, individual and cultural diversity, ethics and legal foundations, and professional identification are related to supervision/management.
- Is not attentive to the developmental process of supervision and/or does not adjust supervision to meet the developmental level of the trainee.
- Does not use appropriate strategies to handle conflicts that arise in the supervisory relationship.
- Does not use constructive feedback and remediation to address poor trainee performance.
- Is not aware of the differences between supervision of a trainee and management of an employee.
- When managing employees from other disciplines, does not seek consultation as appropriate to address discipline-specific issues.
- Is not aware of systems issues relevant to his/her specific management setting and/or does not demonstrates skill in negotiating those systems issues.

FOUNDATIONAL COMPETENCIES

All four must be demonstrated in the functional competencies evaluated above.

1) INTERPERSONAL INTERACTIONS

Components:

a. A level of self-awareness exists that promotes effective functioning in each practice domain.
b. An awareness of the needs, feelings, and reactions of others is present and promotes effective functioning in each functional competency.
c. Sensitivity to the welfare, rights, and dignity of others is a priority.

Passing Level Examples:

- Demonstrates awareness of self that permits effective functioning in each practice domain.
- Demonstrates awareness of others that permits effective functioning in each practice domain.
- Conveys sensitivity to the welfare, rights, and dignity of others.

Failing Level Examples:

- Fails to demonstrate a level of self-awareness that permits effective functioning in each functional competency (e.g., inappropriately personalizes, discounts, or misunderstands client’s/patient’s reactions, does not manage countertransference reactions).
- Fails to demonstrate a level of awareness of others that permits effective functioning in each functional competency (e.g., ignores the client’s/patient’s feelings).
- Does not convey an adequate level of sensitivity to the welfare, rights, and dignity of others (e.g., is not compassionate and understanding, is disrespectful, acts in ways that are harmful to the client/patient).
2) INDIVIDUAL AND CULTURAL DIVERSITY

Components:

a. Knowledge about individual and cultural diversity is evident.
b. Sensitivity and responsiveness to individual and cultural diversity in each functional competency is apparent.
c. An awareness of the interaction between one’s own diversity characteristics and those of the people or contexts with whom or in which one is functioning as a Clinical Child and Adolescent Psychologist is conveyed.

Passing Level Examples:

- Conveys knowledge about individual and cultural diversity.
- Demonstrates sensitivity and responsiveness to individual and cultural diversity in each practice domain.
- Conveys an awareness of the interaction between one’s own diversity characteristics and those of the people or contexts with whom or in which one is functioning as a Clinical Child and Adolescent Psychologist.

Failing Level Examples:

- Fails to convey adequate or correct knowledge about individual and cultural diversity.
- Fails to demonstrate sensitivity and responsive to individual and cultural diversity in each functional competency (e.g., selects assessment tools or research measures not normed for individuals with demographics similar to client/patient being tested, does not include a culturally informed case conceptualization or recommendations).
- Fails to convey an adequate awareness of the interaction between one’s own diversity characteristics and those of the people or contexts with whom or in which one is functioning as a Clinical Child and Adolescent Psychologist.

3) ETHICAL AND LEGAL FOUNDATIONS

Components:

a. Knowledge about ethical standards is apparent and there is evidence that these standards guide all of their professional functioning.
b. Knowledge about legal standards is apparent and there is evidence that these standards guide all of their professional functioning.

Passing Level Examples:

- Demonstrates awareness of the ethical implications of various situations and can cite an ethical quandary from own practice and describe appropriate responses.
- Demonstrates awareness of statutory reporting and other legal requirements that practitioners must follow in their jurisdiction, can cite examples from their own practice when these requirements were relevant, and can describe appropriate behaviors in response.

Failing Level Examples:

- Is unaware of important ethical implications or does not comply with ethical guidelines and principles.
• Is unaware of relevant legal standards or these standards do not affect his/her practice behavior.

4) PROFESSIONAL IDENTIFICATION

Components:

a. Active participation in the profession is demonstrated.
b. Familiarity with current significant issues facing the profession is demonstrated, as is an awareness of the implication of these issues for one’s functioning as a Clinical Child and Adolescent Psychologist.
c. Consultation and supervision are sought after and utilized appropriately.
d. Continuing professional education is valued.

Passing Level Examples:

• Demonstrates active participation in the profession (belongs to professional organizations, assumes leadership roles in professional organizations)
• Demonstrates familiarity with current key issues facing the profession and the implication of these issues.
• Seeks consultation and supervision when needed.
• Participates in continuing professional education activities.

Failing Level Examples:

• Does not actively participate in the profession (does not belong to professional organizations, no active professional involvements outside of specific employment).
• Lacks adequate awareness of significant issues facing the profession, but misunderstands their implications for professional functioning.
• Fails to provide evidence for seeking consultation or supervision when needed or does not appropriately utilize consultative or supervisory input.
• Does not participate in continuing professional education activities

IX. FINAL EXAMINATION PROCEDURES AND CANDIDATE NOTIFICATION

EXAMINATION RESULTS
Candidates are notified within one week of the oral exam. If successful, the Candidate will also receive notification of receipt of 10 Continuing Education credits from the APA. If unsuccessful, the Candidate will receive a detailed report indicating the rationale for the decision, suggestions to address areas of weakness and encouragement to retake the exam at a later date. Candidates who fail have the right to appeal the decision if they believe procedural errors occurred in their examination.

EXAMINATION FEEDBACK
Candidates are encouraged to provide feedback on the examination process. They may do this via contacting Central Office or any ABCCAP representative, including those who were not an examiner, to encourage greater depth and candidness of comments.
**IX. APPENDICES**

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### FORM A: STEPS IN THE ABCCAP BOARD CERTIFICATION PROCESS

1. Applicant consults the Web site (www.abpp.org) or contacts the ABPP Central Office (CO) (919-537-8031, Fax 919-537-8034) to request Examination Manual and Application Form.

2. **Eligibility: Candidacy (Stage 1)**
   - Applicant completes Application Form and submits to ABPP the necessary supporting documentation and **Application Fee of $125**.

3. Generic requirements for the doctoral degree, the internship, licensure, and professional standing (disciplinary status) are verified by the ABPP Central Office (CO).

4. If generic requirements are met, the application is forwarded to the ABCCAP Credential Reviewer for specialty review; that decision is sent to CO.

5. CO informs the applicant of the Stage 1 review outcome. If the application is not approved or is deemed incomplete, CO informs Applicant of the reasons. If additional information may bring about approval, it is requested and must be re-submitted.

6. **Examination: Practice Sample Review (Stage 2)**
   - If the application is approved, the Applicant becomes a Candidate and begins preparing the Practice Sample. The Candidate may contact the Exam Coordinator to request a mentor. The Candidate submits a) the Practice Sample to the Exam Coordinator within 12 months of the candidacy notification; b) the **Practice Sample Fee of $250** to the ABPP CO. The Exam Coordinator reviews the Practice Sample for completeness. If incomplete, the Exam Coordinator will request additional material from the Candidate.

7. Upon acceptance of the completed Practice Sample, a tentative committee is scheduled by the Exam Coordinator, who informs the candidate. The candidate has one week to state any objections to the committee composition.

8. The Exam Coordinator sends the Practice Sample to the committee members. The Examination Committee Chair coordinates the Practice Sample Review, the decision of which is sent to CO and the Candidate.

9. If the Practice Sample Review is deemed a fail, the Examination Committee Chair prepares a summary based on feedback from the committee and sends this to CO, who notifies the Candidate of the reasons and the current examination process is halted. With a new examination fee submitted to CO within six months, a new Practice Sample may be submitted and this phase of the examination process starts over with a new Examination Committee Chair.

10. **Examination: Oral Examination (Stage 3)**
    - Upon notification of passing the Practice Sample Review, the Candidate sends the **Oral Examination Fee of $450** to CO and schedules the Oral Examination with the Examination Chair. The Chair may not finalize the Oral Examination schedule until CO verifies the Oral Examination Fee has been received.

11. Oral Examination results are sent to CO and Exam Coordinator immediately following the examination. If the Oral Examination is passed, the Candidate will be notified by the CO. The Candidate becomes Board-Certified, may begin to use the title immediately, and will receive the diploma within 45 days from the ABPP CO appropriately signed by the ABCCAP and ABPP.

12. Decisions made by the ABCCAP regarding Candidacy (Stage 1), the Practice Sample (Stage 2), and the Oral Examination (Stage 3) should be sent via the on-line form. CO forwards decision letters reflecting ABCCAP actions to candidates within a day-or-two following receipt of the notifications. Copies of these letters are forwarded to the ABCCAP President and Exam Coordinator.

13. If the Oral Examination is failed, Committee feedback should be reviewed by the ABCCAP President or Exam Coordinator before sending to CO.
FORM B: SPECIALTY SPECIFIC CREDENTIAL REVIEW RESULT FORM

Application for ABCCAP, the first page of which is captured below, is made online at the ABPP website.
FORM C-1: REGULAR OPTION PRACTICE SAMPLE CHECKLIST

<table>
<thead>
<tr>
<th>CHECK WHEN COMPLETE</th>
<th>MATERIALS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Three copies of the Curriculum Vitae and Professional Statement</td>
<td></td>
</tr>
<tr>
<td>Three copies of the supplemental materials (e.g., testing raw materials and protocols, with any answer sheets, profiles, and computer printouts if formal assessment is conducted) for the two different Practice Samples (i.e., assessment, intervention, consultation, supervision/management)</td>
<td></td>
</tr>
<tr>
<td>Three copies of a 50-minute, unedited recording of the two different Practice Samples, where both the Candidate and the Client/patient are visible and clearly audible</td>
<td></td>
</tr>
<tr>
<td>$250 Practice Sample fee submitted to ABPP Central Office</td>
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</tr>
<tr>
<td>CHECK WHEN COMPLETE</td>
<td>REQUIRED INFORMATION</td>
</tr>
<tr>
<td>---------------------</td>
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</tr>
<tr>
<td>Contextual Statement: with dates of client/patient contacts, non-identifying descriptive information, presenting problem, brief history</td>
<td></td>
</tr>
<tr>
<td>Rationale for procedures used</td>
<td></td>
</tr>
<tr>
<td>Copies of all masked raw data (if applicable)</td>
<td></td>
</tr>
<tr>
<td>Formation and discussion of the problem in terms of identified theory of practice and relevant research</td>
<td></td>
</tr>
<tr>
<td>Diagnosis</td>
<td></td>
</tr>
<tr>
<td>Recommendations</td>
<td></td>
</tr>
<tr>
<td>Discussion of the individual and cultural diversity and ethical/legal considerations involved</td>
<td></td>
</tr>
<tr>
<td>Reflective comment on the Candidate’s own behavior and interpersonal interactions in the sample</td>
<td></td>
</tr>
<tr>
<td>Copy of the full (redacted) professional written report (if applicable)</td>
<td></td>
</tr>
<tr>
<td>Attestation that written informed consent was secured</td>
<td></td>
</tr>
</tbody>
</table>

MATERIALS MUST HAVE BEEN COLLECTED WITHIN ONE YEAR PRIOR TO SUBMISSION AND SUBMITTED WITHIN ONE YEAR AFTER SUCCESSFUL CANDIDACY DETERMINATION
### FORM C-3: INTERVENTION PRACTICE SAMPLE

<table>
<thead>
<tr>
<th>CHECK WHEN COMPLETE</th>
<th>REQUIRED INFORMATION</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Contextual statement with dates of client/patient contacts, current session number in total sequence, non-identifying descriptive information and history, presenting problem, course of treatment, diagnosis (Axis I-V)</td>
</tr>
<tr>
<td></td>
<td>Theoretical and empirical rationale for interventions used and goals for present intervention</td>
</tr>
<tr>
<td></td>
<td>Formulation and discussion of the intervention in terms of identified theory of practice and relevant research</td>
</tr>
<tr>
<td></td>
<td>Means of monitoring progress/outcome</td>
</tr>
<tr>
<td></td>
<td>Discussion of the individual and cultural diversity and ethical/legal considerations involved</td>
</tr>
<tr>
<td></td>
<td>Reflective comment on the Candidate’s own behavior and the interpersonal interactions in the sample</td>
</tr>
<tr>
<td></td>
<td>Copy of the full professional (redacted) written report (if applicable)</td>
</tr>
<tr>
<td></td>
<td>Attestation that written informed consent was secured</td>
</tr>
</tbody>
</table>

**MATERIALS MUST HAVE BEEN COLLECTED WITHIN ONE YEAR PRIOR TO SUBMISSION AND SUBMITTED WITHIN ONE YEAR AFTER SUCCESSFUL CANDIDACY DETERMINATION**
## FORM C-4: CONSULTATION PRACTICE SAMPLE

<table>
<thead>
<tr>
<th>CHECK WHEN COMPLETE</th>
<th>REQUIRED INFORMATION</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Contextual statement with dates of consultation contacts, non-identifying descriptive information of the consultation context, purpose and goals of consultation, brief history of consultation</td>
</tr>
<tr>
<td></td>
<td>Theoretical and empirical rationale for consultation activities used, goals for present consultation, and recommendations</td>
</tr>
<tr>
<td></td>
<td>Formulation and discussion of the consultation in terms of identified theory of practice and relevant research</td>
</tr>
<tr>
<td></td>
<td>Discussion of the individual and cultural diversity and ethical/legal considerations involved</td>
</tr>
<tr>
<td></td>
<td>Reflective comment on the Candidate’s own behavior and the interpersonal interactions in the sample</td>
</tr>
<tr>
<td></td>
<td>Copy of the full professional (redacted) written report (if applicable)</td>
</tr>
<tr>
<td></td>
<td>Attestation that written informed consent was secured</td>
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# FORM C-5: SUPERVISION OR MANAGEMENT PRACTICE SAMPLE

<table>
<thead>
<tr>
<th>CHECK WHEN COMPLETE</th>
<th>REQUIRED INFORMATION</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Contextual statement with dates of supervision or management activity, non-identifying descriptive information of the context, purpose and goals of the activity, brief history of the supervisory or management relationship</td>
</tr>
<tr>
<td></td>
<td>Theoretical and empirical rationale for the activities used, goals for present activity, and recommendations</td>
</tr>
<tr>
<td></td>
<td>Formulation and discussion of the activity in terms of identified theory of practice and relevant research</td>
</tr>
<tr>
<td></td>
<td>Discussion of the individual and cultural diversity and ethical/legal considerations involved</td>
</tr>
<tr>
<td></td>
<td>Reflective comment on the Candidate’s own behavior and the interpersonal interactions in the sample</td>
</tr>
<tr>
<td></td>
<td>Copy of the full professional (redacted) written report (if applicable)</td>
</tr>
<tr>
<td></td>
<td>Attestation that written informed consent was secured</td>
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</table>

**MATERIALS MUST HAVE BEEN COLLECTED WITHIN ONE YEAR PRIOR TO SUBMISSION AND SUBMITTED WITHIN ONE YEAR AFTER SUCCESSFUL CANDIDACY DETERMINATION**
FORM C-6: SENIOR OPTION PRACTICE SAMPLE CHECKLIST  
*(See text for details)*

<table>
<thead>
<tr>
<th>CHECK WHEN COMPLETE</th>
<th>REQUIRED INFORMATION</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Three copies of the Curriculum Vitae and Professional Statement</td>
</tr>
<tr>
<td></td>
<td>Two samples of functional competencies in professional publications, brochures, outlines, presentations, or portfolios regarding assessment, intervention, consultation, or supervision/management activities related to the practice of clinical child and adolescent psychology.</td>
</tr>
<tr>
<td></td>
<td>$250 Practice Sample fee submitted to ABPP Central Office</td>
</tr>
</tbody>
</table>
FORM D: PROFESSIONAL STATEMENT

The Candidate should answer all questions in 10 or fewer double spaced, typewritten pages and submit this material with the Practice Sample.

1. Tell the committee about the professional work in clinical child and adolescent psychology in which you are engaged at this time. Be sure to focus on your current employment and professional activities at the local, state, and national level; continuing professional education activities; long term plans in psychology; and reasons for seeking board certification.

2. Provide evidence for the ways in which you utilize or contribute to the current science base by addressing one of the two following points. (a) Discuss the evidence base that informs your practice, including how you determine if your activities as a Clinical Child and Adolescent Psychologist are effective; or (b) describe your own current clinical-research activities and how these inform practice.

3. Discuss your current professional activities in the following domains: assessment, intervention, consultation, and supervision/management. Describe the theoretical and empirical basis for these activities. This discussion should include a description of your professional theoretical framework and a discussion of how researchers and theorists in the field have influenced you. If you consider yourself eclectic or integrative, describe at least three major themes in your eclecticism or integrative model. Address ways in which your theoretical model informs your attitude toward individual and cultural diversity considerations as they impact your assessment, intervention, consultation, and/or supervision/management activities.

4. Provide examples of handling of complex interpersonal interactions in the domains of assessment, intervention, consultation, and/or supervision/management.

5. Please share specific examples of awareness of individual and cultural diversity as pertinent to your scholarship, assessments, interventions, consultations and/or supervision/management, as well as in interpersonal interactions.

6. Describe in 1-2 paragraphs an ethical dilemma encountered in your work as a Clinical Child and Adolescent Psychologist. Address to what aspects of the APA Ethical Principles of Psychologists and Code of Conduct it related and how you handled the dilemma. If applicable, address diversity considerations that arose in resolving this dilemma.

7. Attest that no ethical/legal action has taken place since admission to candidacy.

Enclose three copies of:

a) your Curriculum Vitae

b) a (blank-sample) Informed Consent used in your practice setting

c) A (blank-sample) Health Information Portability and Privacy Act (HIPPA) form used in your practice setting
FORM E: VOLUNTARY CONSENT AGREEMENT

American Board of Clinical Child and Adolescent Psychology
American Board of Professional Psychology

I, _______________________________________________, agree to participate in a psychological service, which includes recording of an assessment, intervention, consultation, or supervision/management activity.

__________________________________, ______________________________________
Name                     Relationship

__________________________________, ______________________________________
Name                     Relationship

I am aware that the assessment, intervention, consultation, supervision/management activity will be recorded for the purpose of being observed by psychologists who will be evaluating Dr. ________________________________, a licensed psychologist applying for Board Certification by the American Board of Clinical Child and Adolescent Psychology (ABCCAP), a Specialty Board of the American Board of Professional Psychology (ABPP). No one other than those involved in the examination process will be allowed to observe the recording and related documents. The recording and related documents will be returned to Dr. __________________________ immediately upon completion of the examination.

I recognize that my participation in this process is entirely voluntary and not a requirement to receive psychological services. I have been told that I will receive a copy of this consent form.

Date: ____________________ Participant: _________________________________

Date: ____________________ Participant: _________________________________

Date: ____________________ Psychologist: ________________________________

Candidate will keep the original of this consent agreement for her/his records and not mail it with the Practice Samples. Do not give a copy of this form to the Examination Team.
A. **Specialty Board Appeals Committee**: The president appoints one member of the Board of Clinical Child and Adolescent Psychology to coordinate appeals. For each appeal an *ad hoc* committee is appointed to review the merits of the appeal.

B. **Appealable Decisions:**
The following decision of the Specialty Board may be appealed:

1. Denial of meeting specialty specific qualifications (Candidacy Determination).
2. Non-approval of practice (work) samples (Examination: Practice Sample Component).
3. Failure of the oral examination (Examination: Oral Component).

Note: An appealable decision shall not be final until the appeal process has been completed.

C. **Filing an Appeal**: The candidate may challenge an appealable decision within 30 days of the receipt of written notice of that decision. The candidate must specify the grounds on which the appeal is made. The alleged grounds must be numbered and must be a violation of the Specialty Board’s procedures.

The appeal should be addressed to the President of the Specialty Board, who in turn shall refer it to the coordinator of appeals, who will appoint an *ad hoc* appeals committee. The committee reviewing the appeal must complete its review within 60 days after receipt of the request for appeal letter.

Appeals related to the denial of meeting general requirements for candidacy shall be forward to the Executive Officer for resolution by the ABPP Standards Committee, whose decision on these requirements is final.

D. **Score and Conduct of Appeal.** The procedural issues addressed by the Appeal Committee shall be limited to those stated in the appeal request letter and which meet the requirement of an appealable procedural issue. If legal issues appear to be involved, the Appeals Committee may consult with the ABPP legal counsel.

The Appeals Committee shall implement a process of review primarily based upon information before the specialty board at the time of the decision. The Appeals Committee may seek further information from the Chair and members of the Examination Committee, the Credentials Review Committee, the candidate, or others as appropriate to the issues raised. The process is not a *de novo* review, but a review of the challenge to the Specialty Board decision.
The Appeals Committee shall confer as soon as possible upon the Specialty Board’s receipt of the Candidate’s letter requesting an appeal and shall complete its review and decision addressing each issue(s) raised by the appellant, within 60 days. Failure to complete the review in the 60-day period shall move the appeal to the Standards Committee for resolution.

E. **Decision and Report of Appeal Committee.** The decision of the Specialty Board should be affirmed unless there was a failure by the Specialty Board to adhere to its procedures. In any case, the procedural error would have to be such that it may substantially affect the decision.

If the Candidate demonstrates by clear and convincing evidence that there was a procedural error that harmed the Candidate in a material way, the Committee shall provide a remedy.

The remedy will ordinarily be to void an oral examination, or Practice Sample review, and offer a new examination, or Practice Sample review with no additional fee assessed to the Candidate, or to refer the matter back to the Examination Committee. In extraordinary circumstances, another remedy may be provided. The Appeals Committee however, may not “pass” a Candidate or re-grade an examination.

The report of the Appeals Committee shall address each issue raised by the Candidate and its decision related thereto and the basis for that decision. The report shall be forwarded to the Executive Officer through the Specialty Board President. The report shall then be forwarded to the Candidate under the Executive Officer’s signature on the ABPP stationary. Editing for format and for legal considerations on advice of the ABPP legal counsel may be undertaken by the Executive Officer if necessary.
FORM I: QUALIFICATIONS FOR TESTING ACCOMMODATIONS
For Applicants with Disabilities

The American Board of Clinical Child and Adolescent Psychology
General Information

The American Board of Clinical Child and Adolescent Psychology (ABCCAP) recognizes that psychologists with disabilities may wish to take the board certification examinations and will attempt to make accommodations for applicants with verified disabilities. The Board supports the intent of the American with Disabilities Act (ADA).

ABCCAP will provide reasonable accommodations during testing to provide equal opportunity for persons with disabilities. Applicants are reminded, however, that “auxiliary aids (and services) can only be offered if they do not fundamentally alter the measurement of skills or knowledge the examination is intended to test” (Americans with Disabilities Act, Public Law 101-336 § 309 [b] [3]). To this extent, the Board will provide reasonable accommodations during testing to provide equal opportunity for persons with disabilities. Documentation requesting reasonable accommodations must identify a disability and provide a rationale for specified modifications to standard testing procedures.

Applicants who request accommodations because of a disability must advise the Board in writing when submitting Phase 1 materials. Required documentation includes completion of the Application for Testing Accommodations and appropriate diagnostic letters or reports. All information and documentation provided regarding the disability and need for accommodation in testing will be treated in strict confidence.

Candidates seeking disability accommodations should download the appropriate application from the ABPP web site, www.abpp.org.

Documentation on file for the applicant must:

- clearly state the diagnosed disability or disabilities;
- describe the functional limitations resulting from the disability or disabilities;
- be current - i.e., completed within the last 5 years for a learning disability, last 6 months for psychiatric disabilities, or last 3 years for attention deficit hyperactivity disorder and all other disabilities (NOTE: this requirement does not apply to physical or sensory disabilities of a permanent or unchanging nature);
- include complete educational, developmental, and medical history relevant to the disability for which testing accommodations are being requested;
- include a list of all test instruments used in the evaluation report and relevant scores used to document the stated disability (this requirement may not apply to physical or sensory disabilities of a permanent or unchanging nature);
- describe the specific accommodations requested;
- adequately support each of the requested testing accommodation(s);
- be typed or printed on official letterhead and be signed by an evaluator qualified to make the diagnosis (include information about license or certification and area of specialization).
Review of Documentation
A letter detailing the specific accommodations requested because of disability must be submitted for each examination or re-examination. Documentation should be marked “ADA Materials” and mailed to the attention of the ABCCAP Credentials Reviewer (name/address found on the ABCCAP website, www.clinicalchildpsychology.com). Each report is reviewed carefully before accommodations are provided. If the Board does not find appropriate and sufficient evidence to grant accommodations, the applicant will be informed that the request has been denied.

Appeals
Any applicant who is denied accommodations may appeal this decision by submitting the following materials to the ABCCAP President (name/address found on the ABCCAP website, www.clinicalchildpsychology.com).

• A written request for a formal appeal of the denial of accommodations.
• Additional written information in support of the appeal.

The appeal materials must be sent together in a single mailing envelope that is postmarked within 60 days of the date indicated on the letter of denial of accommodations. The appeal materials will be sent to the Appeals Committee, which will review the materials, deliberate, and make a determination. In all events, the Appeal Committee’s determination is final and binding on both the Board and the applicant.
FORM J: APPLICATION FOR TESTING ACCOMMODATIONS
For Applicants with Disabilities

The American Board of Clinical Child and Adolescent Psychology

APPLICATION FOR TESTING ACCOMMODATIONS

Please indicate “ADA Materials” on the envelope,
And return complete Application and attachments to the ABCCAP Credentials Reviewer
(name/address available on website)

Please type or print.

1. Accommodations are requested for the following:
   ____ Practice Sample   ____ Oral Examination   ____ Both

2. Name: ________________________________________________________________
   Last First Middle

3. Address: ___________________________________________________________________
   Street ___________________________________________________________________
   City State/Province Country
   Postal Code ___________________________________________________________________
   Daytime Telephone Number

4. Social Security #: _______ - _______ - _______
   5. _______/_______/_______
   Date of Birth

6. Nature of Disability (Complete and return checklists A, B, and/or C as indicated below.):
   ____ Hearing (A)   ____ Visual (A)   ____ Physical (A)
   ____ Learning (A & B)   ____ Attention-Deficit/Hyperactivity (A & C)
   ____ Other (A) (specify):

7. In order to document your need for accommodation as completely as possible, please attach, in
   addition to the professional documentation detailed in ABCCAP’s Qualifications for Testing
   Accommodations, a personal statement describing your disability and its impact on your daily life and
   professional practice.

8. How long ago was your disability first professionally diagnosed?
   _____ < 1 year   _____ 1-2 years   _____ 3-4 years   _____ > 4 years

9. What accommodation(s) are you requesting? Accommodation(s) must be appropriate to the disability.
   _____________________________________________________________________________
10. If you are requesting additional time, please indicate the amount of time supported by your documentation.

_____ Double time
_____ Other (specify)

11. Do you require wheelchair access to the examination facility? ____ Yes ____ No

12. Prior test accommodations that you have received on

**STANDARDIZED EXAMINATIONS:**

_____ a. Scholastic Aptitude Test (SAT): Month/Year__________/__________
   Accommodations received _______________________________________________

_____ b. American College Testing Program (ACT): Month/Year__________/__________
   Accommodations received _______________________________________________

_____ c. Graduate Record Examination (GRE): Month/Year__________/__________
   Accommodations received _______________________________________________

_____ d. National Licensing Examination (EPPP): Month/Year__________/__________
   Accommodations received _______________________________________________

_____ e. State Licensing Examination:
   State ____________ Month/Year__________/__________
   Accommodations received _______________________________________________

_____ f. Graduate School:
   Name of School ________________ Month/Year__________/__________
   Accommodations received _______________________________________________

_____ g. American Board of Professional Psychology (ABPP):
   Specialty Board ________________
   Month/Year__________/__________
Accommodations received __________________________________________________

_____ h. Other Board Certification: Specialty Board

Specialty Board ____________________

Month/Year ___________/ ____________

Accommodations received __________________________________________________
American Board of Clinical Child and Adolescent Psychology

CHECKLIST A

Documentation Requirements for All Disabilities

To be granted accommodations at either the written or oral examination of ABCCAP, the applicant must submit a letter or report diagnosing the applicant’s disability. The letter/report must include the following:

_____ Be written by a licensed or certified professional who is appropriately qualified to evaluate the disability.

_____ Be on the examiner’s letterhead with the examiner’s credentials, address, and telephone number given in the letterhead or title.

_____ The candidate’s name, date of birth, and date of testing, and it must be signed by the examiner.

_____ Identify the applicant’s disability and how the disability substantially limits one or more major life activities of the applicant.

_____ A history of the disability, including previous settings in which accommodations have been granted. If there have been no previous accommodations, the examiner must explain why current circumstances necessitate accommodations.

_____ Diagnostic information from the most recent edition of one of the following sources: International Classification of Diseases (ICD), American Psychiatric Association Diagnostic and Statistical Manual of Mental Disorders (DSM).

_____ Specific recommended accommodations with a rationale for why each accommodation is needed.
American Board of Clinical Child and Adolescent Psychology

CHECKLIST B

Documentation Requirements for Learning Disabilities

To be granted accommodations at either the written or oral examination of ABCCAP, the applicant must submit a letter or report diagnosing the applicant’s disability. The letter/report must include the following:

_____ A psychoeducational or neuropsychological evaluation of the applicant as an adult prepared by a licensed or certified psychologist.

_____ A complete cognitive assessment using appropriate standardized and well normed tests.

_____ A comprehensive achievement test battery in relevant areas such as, reading, spelling, written language, and mathematics.

_____ Test instruments must be reliable, valid, and standardized on adult populations. Test scores must be reported using standard scores or percentiles.

_____ A history of the candidate’s educational performance documenting the nature of school difficulties. Information about learning difficulties in school and documentation of prior accommodations should also be included.

_____ Documentation of cognitive and achievement deficits that relate directly to the requested accommodations.
American Board of Clinical Child and Adolescent Psychology

CHECKLIST C

Documentation Requirements for
Attention Deficit/Hyperactivity Disorder

To be granted accommodations at either the written or oral examination of ABCCAP, the applicant must submit a letter or report diagnosing the applicant’s disability. The letter/report must include the following:

_____ A multidimensional diagnostic evaluation by an appropriately licensed or certified psychologist, neuropsychologist, or physician that includes historical, observational, medical, developmental, neuropsychological testing, and educational testing information.

_____ The letter or report must have been completed within the past five years of the candidate’s request for accommodations and include a description of the current functional limitations.

_____ A summary of clinical interviews, observations, and results from checklists provided by the candidate and parents, teachers, professionals, or supervisors.

_____ Results of each objective test must be listed and reported in standard scores or percentiles.

_____ A discussion of possible differential diagnoses must be included.

_____ Recommendations for treatment (medication or behavioral interventions) and academic accommodations should be included with a rationale for why specified test accommodations are needed. It is important to document prior accommodations. If prior accommodations have not been provided, a clear explanation should be included as to why the requested accommodations are needed at this time.