



**CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION
OFFICE OF WORKFORCE PLANNING
QUALIFICATIONS ASSESSMENT FOR:

SCHOOL PSYCHOLOGIST**

This examination will provide you with an opportunity to demonstrate significant aspects of your qualifications for School Psychologist with the California Department of Corrections and Rehabilitation (CDCR). The information you provide will be rated based on objective criteria created by Subject Matter Experts. The rating will be used to determine your final score in this examination. If successful, your name will be merged onto an eligible list. The list will be used by CDCR Facilities statewide to fill vacant positions. A "Conditions of Employment" form is included in this examination which will allow you to select the location and time base you are interested in working. It is required that you personally complete this examination accurately and without assistance.

You will be evaluated based on your ability to follow directions and read, interpret, and respond appropriately to the questions in this Qualifications Assessment. Candidates who fail to follow the instructions will be eliminated from the examination.

AFFIRMATION STATEMENT

THIS AFFIRMATION MUST BE COMPLETED

I hereby certify that the information provided on this Qualifications Assessment Questionnaire is true and correct to the best of my knowledge and contains no willful misrepresentations or falsifications. I also understand that if it is later discovered that I have made any false representations, I may be removed from the examination and/or the eligible list resulting from this examination, have adverse action taken against me which could result in loss of State employment, and/or suffer loss of right to compete in any future State examinations.

Name (Printed): _____

Address: _____

City/State/Zip Code: _____

Home Telephone Number: _____

Work Telephone Number: _____

Signature: _____

Date: _____

GENERAL INSTRUCTIONS

Read Instructions Carefully

This process is the entire examination for this classification. Therefore, please be sure to follow the instructions carefully as missing or incomplete information may result in disqualification or a low score.

1. Additional instructions are provided on the following pages.
2. The examination is intended to provide candidates the opportunity to demonstrate their knowledge and experience in a variety of areas. It is not expected that you will have experience in all areas.
3. If successful, your name will be placed on an eligible list. This examination enables you to apply for the School Psychologist classification.

GENERAL INSTRUCTIONS (Continued)

The following areas comprise the complete examination for School Psychologist. You must ensure you have addressed each of the following areas:

- Affirmation Statement (Page 1)
- Montoya Act/Felony Conviction Disclosure (Page 2)
- Prior State Employment Information (Page 3)
- Conditions of Employment Form for CDCR Youth Facility Listings Only (Page 4)
- Required Credential Information (Page 5)
- Job Requirements (Page 6)
- Knowledge, Skill, and Ability Assessment (Pages 7, 8, and 9)
- Work Experience (Pages 10, 11, and 12)

YOUR RESPONSES ARE SUBJECT TO VERIFICATION

Please keep in mind that all information provided on this Qualifications Assessment will be subject to verification at any time during the examination process, hiring process, and even after gaining employment. Anyone who misrepresents his/her experience will be subject to adverse consequences, which could include the following actions(s):

- Removal from the examination process
- Removal from the certification list(s)
- Loss of State employment
- Loss of rights to compete in any future State examinations

MONTOYA ACT/FELONY CONVICTION DISCLOSURE

Pursuant to the Montoya School Safety Act of 1997, all persons offered employment with the CDCR's Division of Juvenile Justice, Education Services Branch, shall undergo a thorough background investigation prior to appointment. Pursuant to the Education Code Section 45122 and Penal Code Sections 677 and 1192, **"No person who has been convicted of a violent or serious felony shall be employed by a school district."**

To review the Education Code Section 45122, you can go to the following website:

<http://caselaw.lp.findlaw.com/cacodes/edc/45100-45139.html>

To review the Penal Code Section 667.5, subsection (c) for a listing of violent felony offenses, you can go to the following website:

<http://caselaw.lp.findlaw.com/cacodes/pen/654-678.html>

To review the Penal Code Section 1192.7, subsection (c) for a listing of serious felony offenses, you can go to the following website:

<http://caselaw.lp.findlaw.com/cacodes/pen/1191-1210.5.html>

Have you ever been convicted of a violent or serious felony?

<input type="checkbox"/>	YES
<input type="checkbox"/>	NO

PRIOR STATE EMPLOYMENT INFORMATION

Complete this next section **ONLY** if you have been previously dismissed from California State Civil Service employment by punitive action or as a result of disciplinary proceedings. **IF THIS DOES NOT APPLY TO YOU, please mark the “Not Applicable” box below and continue to the next section.**

State Personnel Board, Rule 211 provides that a dismissed State employee may only participate in State Civil Service examinations if he/she has obtained prior consent from the State Personnel Board.

Do you have written permission from the State Personnel Board Executive Officer to take this examination?

<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NOT APPLICABLE
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CONDITIONS OF EMPLOYMENT FORM FOR CDCR YOUTH FACILITY LISTINGS ONLY

PLEASE MARK THE APPROPRIATE BOX(ES) OF YOUR CHOICE - YOU WILL NOT BE OFFERED A JOB IN LOCATIONS NOT MARKED.

If you are successful in this examination, your name will be placed on an active employment list and referred to fill vacancies according to the conditions you specify on this form. Therefore, before you mark this form, there are some things you should consider. If you are not planning to relocate or are not willing to travel to a distant job location, do not select locations that are a long way from your residence.

TYPE OF APPOINTMENT YOU WILL ACCEPT

Please mark the appropriate box(es) - you may check "(A) Any" if you are willing to accept any type of employment.

(D) Permanent Full-Time **(R) Permanent Part-Time** **(K) Limited-Term Full-Time** **(A) Any**
If all are marked and you receive an appointment other than permanent full-time, your name will continue to be considered for permanent full-time positions.

LOCATION(S) YOU ARE WILLING TO WORK

7231 **NORTHERN REGION** – *If this box is marked, no further selection is necessary.*

YOUTH FACILITIES:

- 3908 **O.H. Close Youth Correctional Facility**
Stockton, San Joaquin County
- 3917 **N.A. Chaderjian Youth Correctional Facility**
Stockton, San Joaquin County
- 0311 **Pine Grove Youth Conservation Camp**
Pine Grove, Amador County

SOUTHERN REGION

YOUTH FACILITIES:

- 5610 **Ventura Youth Correctional Facility**
Camarillo, Ventura County

ADDRESS OR AVAILABILITY FOR EMPLOYMENT CHANGES

Please notify the California Department of Corrections and Rehabilitation (CDCR) promptly of any address changes or availability for employment changes at the following address:

California Department of Corrections and Rehabilitation
Division of Human Resources
Office of Workforce Planning
P.O. Box 942883
Sacramento, CA 94283-0001
Attn: Certification Unit

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MINIMUM QUALIFICATIONS

Possession of a valid California general pupil personnel services credential with the additional authorization to serve as a school psychologist, or a valid California school psychologist credential, or a valid California standard designated services credential with a specialization in pupil personnel services with the additional authorization to serve as school psychologist. (Applicants who are within one year of receiving one of the required credentials will be admitted to the examination, but must secure one of the required credentials before they will be considered eligible for appointment.)

REQUIRED CREDENTIAL INFORMATION

Please indicate if you possess or have applied for the required credential for the School Psychologist. You must also indicate the credential number and expiration date.

NOTE: Applicants who are within one year of receiving one of the required credentials will be admitted to the examination, but must secure one of the required credentials before they will be considered eligible for appointment.

Requirements:

- I possess the required California general pupil personnel services credential with the additional authorization to serve as school psychologist from the California Commission on Teacher Credentialing.

Credential Number: _____ Expiration Date: _____

- I have applied for the required California general pupil personnel services credential with the additional authorization to serve as school psychologist with the California Commission on Teacher Credentialing.

Or

- I possess the required school psychologist credential from the California Commission on Teacher Credentialing.

Credential Number: _____ Expiration Date: _____

- I have applied for the required school psychologist credential with the California Commission on Teacher Credentialing.

Or

- I possess the required California standard designated services credential with a specialization in pupil personnel services with the additional authorization to serve as school psychologist from the California Commission on Teacher Credentialing.

Credential Number: _____ Expiration Date: _____

- I have applied for the required California standard designated services credential with a specialization in pupil personnel services with the additional authorization to serve as school psychologist with the California Commission on Teacher Credentialing.

CONTINUE TO THE NEXT PAGE

JOB REQUIREMENTS

The following are job requirements. Please respond to each question by marking the appropriate box. If you are unwilling or unable to comply with any of the following job requirements, it may be grounds for elimination from the examination process.

1. Willingness to abide by and adhere to safety policies and provisions (e.g., wear personal alarm, carry whistle, wear protective clothing & apparatus, etc.) applicable to specific work assignments.	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Willingness to comply with annual Tuberculosis screening requirements.	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Willingness to comply with departmental training requirements.	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Willingness to report dangerous situations/contraband to supervisors and/or custody staff.	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Willingness to independently supervise youthful offenders.	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. Willingness to work in a State correctional facility.	<input type="checkbox"/> Yes <input type="checkbox"/> No
7. Willingness to work with youthful offenders, including some who may be mentally ill, developmentally disabled, potentially dangerous, infected with contagious diseases such as Hepatitis C, HIV/AIDS, or Tuberculosis, and/or sex offenders.	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. Willingness to work around peace officers armed with chemical agents and/or weapons.	<input type="checkbox"/> Yes <input type="checkbox"/> No
9. Willingness to report unethical and/or illegal behavior on the part of departmental staff.	<input type="checkbox"/> Yes <input type="checkbox"/> No
10. Willingness to treat youthful offenders in a professional, ethical, and tactful manner.	<input type="checkbox"/> Yes <input type="checkbox"/> No
11. Willingness to participate in team meetings, committees, special projects, etc. as required and/or assigned by your supervisor/manager.	<input type="checkbox"/> Yes <input type="checkbox"/> No
12. Willingness to have and maintain sufficient strength, agility, and endurance to perform during stressful situations encountered on the job.	<input type="checkbox"/> Yes <input type="checkbox"/> No
13. Willingness to carry equipment and materials weighing a minimum of 25 pounds.	<input type="checkbox"/> Yes <input type="checkbox"/> No
14. Willingness to work overtime and on-call hours as required.	<input type="checkbox"/> Yes <input type="checkbox"/> No
15. Willingness to participate in continuing education specific to your work assignment.	<input type="checkbox"/> Yes <input type="checkbox"/> No
16. Willingness to maintain your professional license (e.g., teaching credential) in good standing and comply with the ethical standards of your profession (e.g., California Commission on Teacher Credentialing, etc.) and laws related to the practice of your profession.	<input type="checkbox"/> Yes <input type="checkbox"/> No

KNOWLEDGE/SKILL/ABILITY (KSA) ASSESSMENT

For items #1 - #12, please rate your Knowledge, Skill, or Ability (KSA) by indicating the box that best describes your level of the KSA of each of the following areas. There should be one (1) checkmark for each statement. <u>Definition of Levels:</u> <u>Extensive Knowledge, Skill, or Ability:</u> I have effectively and efficiently applied this KSA to an actual job without supervision. <u>Moderate Knowledge, Skill, or Ability:</u> I have applied this KSA to an actual job, but may require general supervision. <u>Limited Knowledge, Skill, or Ability:</u> I have education or training relevant to this KSA, but have not applied it to an actual job. <u>No Knowledge, Skill, or Ability:</u> I have no experience, education, or training relevant to this KSA.	KSA Level			
	<u>Extensive</u> Knowledge, Skill, or Ability	<u>Moderate</u> Knowledge, Skill, or Ability	<u>Limited</u> Knowledge Skill, or Ability	<u>No</u> Knowledge Skill, or Ability
1. Knowledge of psycho-educational assessments (e.g., cognitive, emotional, behavioral, etc.) to assess student functioning, recommend service needs, develop reports, etc.				
2. Knowledge of life span development (e.g., adolescence, young adulthood) to assess student need, and diagnose and plan appropriate goals and services.				
3. Knowledge of developmental issues (e.g., mental retardation, autism, etc.) to assess and recommend appropriate educational services.				
4. Knowledge of interactions between physiological and psychological functioning (e.g., head trauma and behavior disorders) to develop an Individual Educational Plan (IEP).				
5. Knowledge of criminal thought processes (e.g., manipulation, conning, deceitfulness, etc.) to recognize manifestations and intervene when appropriate.				
6. Knowledge of trauma and stress reactions (e.g., intrusive thoughts, somatic complaints, sleep disorder, appetite disturbance, etc.) to identify their potential negative impact to the students educational progress.				
7. Knowledge of crisis intervention to refer appropriately.				
8. Knowledge of suicide risk assessment and prevention (e.g., plan, means, intent, etc.) to protect the health and safety of students.				
9. Knowledge of assessing and monitoring the Activities of Daily Living (ADL) to evaluate student's level of functioning.				
10. Knowledge of report writing (e.g., Psycho-Educational Reports, etc.) within an educational setting to communicate educational assessment results.				
11. Knowledge of federal laws (i.e., Individuals with Disabilities Education Act [IDEA]) and state laws and regulations (e.g., Mandated Reporting, etc.) related to the practice of School Psychology.				
12. Knowledge of individual differences and cultural diversity issues to provide appropriate culturally sensitive services.				

KNOWLEDGE/SKILL/ABILITY (KSA) ASSESSMENT (Continued)

For items #13 - #23, please rate your Knowledge, Skill, or Ability (KSA) by indicating the box that best describes your level of the KSA of each of the following areas. There should be one (1) checkmark for each statement.

Definition of Levels:

Extensive Knowledge, Skill, or Ability: I have effectively and efficiently applied this KSA to an actual job without supervision.

Moderate Knowledge, Skill, or Ability: I have applied this KSA to an actual job, but may require general supervision.

Limited Knowledge, Skill, or Ability: I have education or training relevant to this KSA, but have not applied it to an actual job.

No Knowledge, Skill, or Ability: I have no experience, education, or training relevant to this KSA.

	KSA Level			
	<u>Extensive</u> Knowledge, Skill, or Ability	<u>Moderate</u> Knowledge, Skill, or Ability	<u>Limited</u> Knowledge, Skill, or Ability	<u>No</u> Knowledge, Skill, or Ability
13. Knowledge of appropriate documentation of contacts, memoranda, and chronos to facilitate communication with treatment providers and other staff.				
14. Knowledge of gender, race, religion, sexual orientation, anti-social/delinquent subcultures, disability, etc., to meet the needs of the population.				
15. Knowledge of the student risk/needs and rehabilitative model principles utilized in the supervision and rehabilitation of youth.				
16. Ability to organize work in order to meet job demands, deadlines, and program guidelines.				
17. Ability to provide psychological consultation to Individual Education Plan [IEP] teams, Interdisciplinary Treatment Teams, peers, and other staff to deliver school psychologist services within an educational setting.				
18. Ability to conduct psycho-educational assessments and deliver required services (e.g., individual and group counseling, etc.) to meet IEP requirements.				
19. Ability to analyze situations (e.g., program issues, etc.) accurately and take appropriate action.				
20. Ability to communicate effectively both orally and in writing to provide information to others (e.g., professional colleagues, treatment teams, correctional staff, etc.), document contacts, record student progress, make recommendations, write reports, memos, progress notes, etc.				
21. Ability to score psycho-educational assessment results according to published protocols to clarify diagnostic issues for special education service recommendations.				
22. Ability to conduct objective interviews to establish rapport, obtain meaningful data, formulate diagnoses, and guide interventions and services.				
23. Ability to interpret psycho-educational assessment results according to published protocols to clarify diagnostic issues for special education service recommendations.				

KNOWLEDGE/SKILL/ABILITY (KSA) ASSESSMENT (Continued)

For items #24 - #25, please rate your Knowledge, Skill, or Ability (KSA) by indicating the box that best describes your level of the KSA of each of the following areas. There should be one (1) checkmark for each statement.

Definition of Levels:

Extensive Knowledge, Skill, or Ability: I have effectively and efficiently applied this KSA to an actual job without supervision.

Moderate Knowledge, Skill, or Ability: I have applied this KSA to an actual job, but may require general supervision.

Limited Knowledge, Skill, or Ability: I have education or training relevant to this KSA, but have not applied it to an actual job.

No Knowledge, Skill, or Ability: I have no experience, education, or training relevant to this KSA.

	KSA Level			
	<u>Extensive</u> Knowledge, Skill, or Ability	<u>Moderate</u> Knowledge, Skill, or Ability	<u>Limited</u> Knowledge, Skill, or Ability	<u>No</u> Knowledge, Skill, or Ability
24. Ability to establish and maintain effective working relationships to provide information and direction as a member of a multi-disciplinary team.				
25. Ability to secure the cooperation of teachers and parents in developing techniques to promote mental health in families of students.				

CONTINUE TO THE NEXT PAGE

WORK EXPERIENCE

For items #1 - #12, refer to the scale description below and rate your level of experience. There should be one (1) checkmark for each statement.

Definition of Levels:

Extensive Experience: More than 4 years of experience performing this task.

Moderate Experience: Over 3 years to 4 years of experience performing this task.

Basic Experience: Over 2 years to 3 years of experience performing this task.

Limited Experience: Over 1 year to 2 years of experience performing this task.

Minimal Experience: 1 year or less experience performing this task.

Length of Experience

		<u>Extensive Experience</u>	<u>Moderate Experience</u>	<u>Limited Experience</u>	<u>Basic Experience</u>	<u>Minimal Experience</u>
1.	Screening students for a special education assessment to determine their needs (e.g., cognitive, emotional, and/or behavioral).					
2.	Conducting individual and/or small group counseling to ensure compliance with federal law (Individuals with Disabilities Education Act [IDEA]) and education codes to meet special education student's needs.					
3.	Administering psycho-educational tests to students to determine emotional and cognitive functioning and to clarify diagnostic issues.					
4.	Scoring (e.g., manually, computerized, etc.) students psycho-educational test responses to provide a basis for test interpretation.					
5.	Interpreting students psycho-educational test results based on test scores to determine emotional and/or cognitive functioning and to clarify diagnostic issues.					
6.	Participating in meetings (e.g., Individual Education Plan [IEP] teams, treatment teams, etc.) to provide information, consultation, and recommendations regarding students possible areas of disability, impact to learning, educational interventions, and to fulfill administrative functions.					
7.	Consulting with staff to define student's needs and recommend interventions as appropriate.					
8.	Participating in program development with staff to develop and implement student IEP for special education students.					
9.	Preparing progress reports and treatment recommendations for assigned students to present to Education Rights Holders, IEP teams and/or treatment teams to develop comprehensive plans and monitor students educational progress.					
10.	Attending professional development training (e.g., conferences, workshops, seminars, etc.) to keep current with assessments, trends, etc. and meet licensing requirements.					
11.	Maintaining professional standards concerning confidentiality of students medical information (e.g., securing and disposing of sensitive materials, obtaining written consent to release information, etc.)					
12.	Documenting student contacts by recording (written or electronic entry) assessments, progress notes, treatment plans, chronos, etc. to provide student information to treatment providers.					

WORK EXPERIENCE

		Length of Experience				
		<u>Extensive Experience</u>	<u>Moderate Experience</u>	<u>Limited Experience</u>	<u>Basic Experience</u>	<u>Minimal Experience</u>
For items #13 - #22, refer to the scale description below and rate your level of experience. There should be one (1) checkmark for each statement. <u>Definition of Levels:</u> <u>Extensive Experience:</u> More than 4 years of experience <u>performing</u> this task. <u>Moderate Experience:</u> Over 3 years to 4 years of experience <u>performing</u> this task. <u>Basic Experience:</u> Over 2 years to 3 years of experience <u>performing</u> this task. <u>Limited Experience:</u> Over 1 year to 2 years of experience <u>performing</u> this task. <u>Minimal Experience:</u> 1 year or less experience <u>performing</u> this task.						
13.	Securing work areas and work materials to ensure the safety and security of staff and students by inspecting premises, controlling equipment (e.g., keys, personal alarms, timers, testing materials, etc.) and disposing of sensitive material properly.					
14.	Reviewing/assessing student case history to develop an IEP and eligibility for Special Education services.					
15.	Providing guidance and/or counseling to students during individual counseling meetings for the purpose of monitoring and evaluating progress in support of the students IEP goals.					
16.	Conducting comprehensive interviews (e.g., parents, teachers, etc.) to assist education staff in developing activities designed to promote the maximum social and emotional growth of each student.					
17.	Collaborating with multi-disciplinary teams to provide guidance, technical review of evidenced based practices and develop new strategies and support by providing diagnostic evaluations for students with disabilities to ensure appropriate educational interventions and programs.					
18.	Providing guidance and/or counseling to assist the students to gain insight into their behavior patterns to promote pro-social behavior in the education environment.					
19.	Participating in and/or conducting in-service training, meetings and/or committees [i.e., Student Consultant Team (SCT) IEP, multi-disciplinary treatment team, etc.] to staff to ensure the principles of Special Education mandates, policies, and laws are met.					
20.	Consulting with school and/or living unit security personnel on varied and/or sensitive/complex special education matters to resolve issues, provide information, options, and/or recommendations, etc.					
21.	Interviewing/counseling students to provide information about available special education, vocational, and transitional opportunities.					
22.	Counseling students as to their progress in their assigned Special Education program to meet their IEP educational goals.					

WORK EXPERIENCE (Continued)

For items #23 - #27, refer to the scale description below and rate your level of experience. There should be one (1) checkmark for each statement.

Definition of Levels:

Extensive Experience: More than 4 years of experience performing this task.

Moderate Experience: Over 3 years to 4 years of experience performing this task.

Basic Experience: Over 2 years to 3 years of experience performing this task.

Limited Experience: Over 1 year to 2 years of experience performing this task.

Minimal Experience: 1 year or less experience performing this task.

		Length of Experience				
		<u>Extensive Experience</u>	<u>Moderate Experience</u>	<u>Limited Experience</u>	<u>Basic Experience</u>	<u>Minimal Experience</u>
23.	Enforcing compliance with IDEA to provide appropriate accommodations utilizing the medical/mental health and education data in accordance with laws and regulations, policies and procedures.					
24.	Preparing reports (i.e., Monthly Service Logs, Academic Reports, progressive discipline documentation, etc.) as required by education and facility management to obtain and/or provide statistical information.					
25.	Evaluating student's progress and performance based upon teacher observations, assessments, completion of daily assignments, grading, and student work to ensure appropriate differentiated instructional practices.					
26.	Preparing effective written documents for management, staff, students, and others to provide information on Special Education programs.					
27.	Communicating in a professional and effective manner with others utilizing tact and interpersonal skills to establish and maintain effective working relationships in all situations.					

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PREPARATION FOR HIRING INTERVIEW

If you are successful in this examination and called for a hiring interview, you will be asked to supply transcripts of your college course work, proof of degree(s) received, credential and/or any registration that may be applicable. In addition, you may be asked to supply supplemental documentation to verify your responses in this examination. It is strongly recommended that you assemble these documents in advance to expedite the process.

RECRUITMENT QUESTIONNAIRE

These questions are not part of the examination. Responses are voluntary and will be used for recruitment statistics.

HOW DID YOU HEAR ABOUT THIS EXAMINATION?

Check the appropriate box below.

- Newspaper/Magazine Advertisement
- Internet
- California Department of Corrections and Rehabilitation employee
- Recruitment Mailing
- College/School
- Job Fair/Career Fair
- Other: _____

STATE APPLICATION AND QUALIFICATIONS ASSESSMENT RETURN AND MAILING PROCEDURES

Submit both the State Application (Std. Form 678) and the Qualifications Assessment to the address below.

Do not attach any additional documents to this Qualifications Assessment or send any forms/documents (e.g., resumes, etc.) in advance as additional documents will not be rated. This Qualifications Assessment will account for 100% of the weight of your examination for this classification.

By mail to:
Department of Corrections and Rehabilitation
Office of Workforce Planning
P.O. Box 942883
Sacramento, CA 94283-0001

or

In person at:
Department of Corrections and Rehabilitation
1515 S Street
Sacramento, CA 95811-7243
Attn: Office of Workforce Planning, 101N

NOTE:

- Be sure your envelope has **adequate postage** if submitting via mail.
- Facsimiles (FAX) will **NOT** be accepted under any circumstances.
- Make and keep a photocopy of the completed State Application and Qualifications Assessment for your records.

YOUR COMPLETED QUALIFICATIONS ASSESSMENT MUST INCLUDE YOUR ORIGINAL SIGNATURE ON THE AFFIRMATION STATEMENT (Page 1).

**THIS CONCLUDES THE QUALIFICATIONS ASSESSMENT FOR
SCHOOL PSYCHOLOGIST**