

SUPERVISION REPORT FORM 102

A guide to understanding the
Supervision Report Form

A detailed look at the
Generic Information & Section 2

SECTION 2

I certify that my functioning as a Psychological Associate has been limited to those activities that do not require supervision. I understand that supervision is required by law for "overall personality appraisal or classification, personality counseling or personality readjustment techniques," regardless of employment setting.

This report covers _____ through _____
(month, day, year) (month, day, year)

Associate's Name (print or type) Signature

BACKGROUND INFORMATION

In its earliest days, the Supervision Report Form was, as it is at present, a two-page document, but with slightly fewer items. There was no "Generic Information" in which the licensee provided his/her contact information; rather, the report consisted of Section 1 and Section 2.

THE PURPOSE OF THE SUPERVISION REPORT FORM

A Supervision Report Form is much like a *progress* report in that it gives the Board an update on your activities for a certain period of time.

A Supervision Report is required to be filed if:

- There is any change in the conditions of your contract already on file with the Board
- You terminate the contract on file with the Board
- The Board notifies you that a report is due (as is the case for LPA and LP-Provisional license renewal and for LPA annual report collection in the summers of odd-numbered years)

THE PURPOSE OF THE SUPERVISION REPORT FORM CONTINUED...

A few examples of when a report needs to be filed are when you:

1. Change work settings
2. Change professional responsibilities and functions
3. Renew your license
4. Move out of state
5. Retire
6. Have received a notice that the Board is collecting reports from all LPAs in the interim period between license renewals

THE DIFFERENCE BETWEEN A "REPORT" AND A "CONTRACT"

Although the Supervision Report Form and Supervision Contract Form contain some of the same information, they are completely different documents, each having its own purpose.

SUPERVISION REPORT FORM

- Two-page document
- Does not require notarization
- Reports on past activities [activities that are listed in contract(s) already on file with the Board]
- Must be filed within 2 weeks of a change in (or termination of) the contract on file with the Board
- Must be submitted annually by LPAs and biannually by LP-Provisionals to report that contracts on file are up-to-date and accurate.

SUPERVISION CONTRACT FORM

- Four-page document
- Must be notarized
- Covers current and future activities
- Must be filed within 30 days of a change in the contract on file with the Board
- Is valid for as long as it accurately reflects current activities and conditions.

NORTH CAROLINA PSYCHOLOGY BOARD

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SUPERVISION REPORT

Read carefully. Type or print. A separate report must be completed for each Supervision Contract Form on file with the Board.

GENERIC INFORMATION

(This information must be supplied on each report.)

1. Name _____ License Number _____
2. Mailing Address _____
Note change in mailing address: Yes No
E-mail address _____ Daytime telephone number (____) _____
3. This report form covers: (**check only one**)
 Practice/work at (provide business name & address):

 Unemployment
 Retirement
4. Work at setting reported in #3 has terminated:
 Yes
 No
 Not Applicable
(checked unemployment or retirement)
5. Report covers the following period of time: _____ through _____
Report must cover past, NOT future, activities. (month,day,year) (month,day,year)
6. For Psychological Associates: Check the supervision Level for which you were approved by the Board during the time period reported in #5.
Levels 2 and 3 require that you previously have been approved by the Board.
 Level 1
 Level 2
 Level 3

**GENERIC INFORMATION:
THE WHO, WHERE,
WHEN, & WHAT OF
THE REPORT**

A report corresponds with an existing contract, so the information provided in the Generic Information of the report must match the information in the contract already on file with the Board. Remember, reports cover *past*, not future, activities.

GENERIC INFORMATION: THE WHO & WHERE

GENERIC INFORMATION
(This information must be supplied on *each* report.)

1. Name Jane Elizabeth Doe License Number 1234

2. Mailing Address 1432 Happiness Trail, Neverland, NC 28910
Note change in mailing address: Yes No
E-mail address jane.doe@gmail.com Daytime telephone number (____) _____

3. This report form covers: (**check only one**)

Practice/work at (provide business name & address):
Interior Designs by Doe
789 Imagination Lane, Suite 102
Neverland, NC 28910

Unemployment
 Retirement

4. Work at setting reported in #3 has terminated:
 Yes No Not Applicable
(checked unemployment or retirement)

Because a Supervision Report reports on an existing contract, the work setting provided in Item 3 should be a work setting for which the licensee already has a contract on file with the Board. Of significant note is that, all information throughout the rest of the report needs to correspond with the work setting reported in Item 3. For example, if Ms. Doe has a contract for her unsupervised work at Interior Designs by Doe *and* an additional contract for her supervised practice at Community One Mental Health, only information pertaining to her work at Interior Designs by Doe should be reported on this form.

If you are terminating employment, remember that, unless you have another contract in addition to the one that you are terminating, a new contract will need to be filed within 30 days.

GENERIC INFORMATION: THE WHEN & WHAT

Reports cover *past*, not *future*, activities. A report only needs to cover the time period since the last filed report. If you have not had to previously report on a contract, then the report will need to cover the period of time since the effective date of the contract. Maintaining copies of previously filed reports and contracts will assist you greatly as you complete future reports and contracts. If you have questions, you are always welcome to call the Board office for assistance.

5. Report covers the following period of time. 09/18/2008 through 02/02/2008
Report must cover past, NOT future, activities. (month,day,year) (month,day,year)
6. For Psychological Associates: Check the supervision Level for which you were approved by the Board during the time period reported in #5.
Levels 2 and 3 require that you previously have been approved by the Board.
- Level 1
 Level 2
 Level 3

This item only applies to *psychological associates*. All psychological associates are approved for "Level 1" supervision (this includes school psychologists practicing under DPI licensure) until they apply and obtain approval from the Board to receive reduced supervision. To be eligible for Level 2 supervision, a licensee must be licensed for a minimum of 3 calendar years and have accrued at least 4500 hours of supervised practice. For Level 3, a licensee must be licensed for 5 calendar years with 7500 hours of supervised practice.

SECTION 2

DO NOT complete or sign this Section if a supervisor completed and signed Section 1 of this report. Otherwise, this section must be completed by Psychological Associates whose activities were limited to those activities which do not require supervision--and by Provisional Licensed Psychologists and Applicants who were not involved in the practice of psychology--at the setting specified in #3 and during the time period specified in #5 of the Generic Information.

I certify that supervision was not required for the time period stated under #5 of the Generic Information for the following reason(s):

- I was not engaged in activities specified in G.S. § 90-270.5(e) or 21 NCAC 54 .2006 as requiring supervision.
[This option is NOT applicable to APPLICANTS or provisionally Licensed Psychologists since ALL activities comprising the practice of psychology MUST be supervised]
- I was licensed by the North Carolina Board of Education as a school psychologist and my professional activities were limited to those duties for which I was a regular salaried employee of a local board of education or by the North Carolina State Department of Public Instruction.
Name of local board of education _____
- I was engaged only in activities which constituted a part of my course of study.
Name of educational institution _____
- I was unemployed.
- I was not practicing psychology in North Carolina.
- I was retired.
- Other (specify) _____

I agree that should my functioning, as indicated in my Supervision Contract Form on file with the Board, change in the future, I will notify the Board of the change and file the appropriate supervision contract form within 30 days of the change.

Licensee's/Applicant's Signature _____ Date _____
Do NOT sign here if supervisor has completed Section 1.

SECTION 2

Section 2 appears at the lower part of the second page of the report.

Complete Section 2 to correspond with the answer provided in Item 3 of the Generic Information. You may check as many options as applicable under Section 2.

SECTION 2 CONTINUED...

In the example, Ms. Doe is an LPA, and is able to check the first option. Even though she has a contract on file for her work at Community One Mental Health where she is engaged in activities requiring supervision, this contract covers *only* those activities associated with Interior Designs by Doe.

I certify that supervision was not required for the time period stated under #5 of the Generic Information for the following reason(s):

- I was not engaged in activities specified in G.S. § 90-270.5(e) or 21 NCAC 54 .2006 as requiring supervision.
[This option is NOT applicable to APPLICANTS or provisionally Licensed Psychologists since ALL activities comprising the practice of psychology MUST be supervised]
- I was licensed by the North Carolina Board of Education as a school psychologist and my professional activities were limited to those duties for which I was a regular salaried employee of a local board of education or by the North Carolina State Department of Public Instruction.
Name of local board of education _____
- I was engaged only in activities which constituted a part of my course of study.
Name of educational institution _____
- I was unemployed.
- I was not practicing psychology in North Carolina. ←
- I was retired.
- Other (specify) Owner/operator of interior design firm.

At this particular work setting, Ms. Doe was not practicing psychology in North Carolina; therefore, this option also applies.

It can be useful to check "Other" if you are ever in doubt, or believe that additional clarification is needed. As with any item, please do not hesitate to contact the Board office if you are unsure what choice to make. Obtaining clarification before mailing the form may save much time and frustration in having to correct and re-submit the form at a later time.

SECTION 2 CONTINUED...

I agree that should my functioning, as indicated in my Supervision Contract Form on file with the Board, change in the future, I will notify the Board of the change and file the appropriate supervision contract form within 30 days of the change.

Licensee's/Applicant's Signature _____ Date _____
Do **NOT** sign here *if* supervisor has completed Section 1.

Page 2 of 2

SupvRpt 0 7/09

Some individuals have contacted the Board office to explain that they did not realize a new contract needed to be filed upon being so informed by the Board. However, Board staff have sometimes found that, after reviewing the individuals' files, they have previously submitted Supervision Reports with the individuals' signatures appearing below the above statement. Therefore, as a reminder, it is important to be aware of what you are signing. When you sign a report, you agree that you understand that a new Supervision Contract Form must be filed within 30 days of a change in the contract on file with the Board.

If any part of the supervision requirements are unclear,
please feel free to contact the Board office for clarification.

