

The following is to be copied onto the therapist's letterhead

PERSONAL PSYCHOTHERAPY INCEPTION FORM

Each student in the M.A. Counseling Psychology program is required to complete a minimum of twenty (10) hours of individual, group, family or marital psychotherapy prior to beginning PSY 631A. The therapist shall sign this form at the inception of therapy. **The therapist must be licensed as a Marriage & Family Therapist (MFCC), Clinical Social Worker (LCSW), Clinical Psychologist, or board-certified Psychiatrist.**

I, _____, hereby certify that
Student

Therapist:

has begun twenty-five hours of group or individual psychotherapy, beginning on:

Start Date

I further certify that I do not teach at the graduate level at National University, nor have I ever been an instructor to this client.

Student I.D. #

Therapist's signature & title

Date:

License Number:

Date Licensed:

Please return to: YOUR REGIONAL FACULTY ADVISOR

OR

YOUR REGIONAL PSYCHOLOGY DEPARTMENT
REPRESENTATIVE

The student is advised to keep a copy of the completed form for their records.