
COMMISSION ON ACCREDITATION
OFFICE OF PROGRAM CONSULTATION AND ACCREDITATION
AMERICAN PSYCHOLOGICAL ASSOCIATION

POSTDOCTORAL SUPERVISOR PREPARATORY FACT SHEET

Supervisor Profile *(This section is completed the first year the supervisor appears in the ARO.)*

Demographics*

1. Name: _____
(First) (Middle) (Last)

First and last names are now an ARO requirement. All information on individuals or their identities provided to the CoA for accreditation purposes will be confidential and for the sole purpose of accreditation.

2. Supervisor Gender *(please select one)*:

Female Male Transgender Other

3. Supervisor Race-Ethnicity *(please select all that apply)*:

American Indian or Alaska Native Native Hawaiian or Other Pacific Islander
 Asian White
 Black or African American Not Reported
 Hispanic-Latino N/A, Canadian Institution

Please consult the [U.S. Dept. of Education's website](#) for descriptions of each category.

4. Supervisor subject to the Americans with Disabilities Act:

Yes No

5. Supervisor a Foreign National:

Yes No

Qualifications*

1. Indicate if the supervisor received a degree from an accredited program in his/her field of expertise: Yes No

2. Graduate program substantive area:

Clinical Psychology
 Counseling Psychology
 School Psychology
 Combined, Clinical-Counseling
 Combined, Clinical-School
 Combined, Counseling-School
 Combined, Clinical-Counseling-School
 Other

If Other: _____

3. Indicate if the supervisor is licensed in his/her field of expertise: Yes No

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4. Indicate if the supervisor is an ABPP Diplomate: Yes No

4a. Diplomate Specialty Area:

- Clinical Child & Adolescent Psychology
- Clinical Health Psychology
- Clinical Neuropsychology
- Clinical Psychology
- Cognitive & Behavioral Psychology
- Counseling Psychology
- Couple & Family Psychology
- Forensic Psychology
- Group Psychology
- Organizational & Business Consulting Psychology
- Psychoanalysis in Psychology
- Rehabilitation Psychology
- School Psychology

5. Indicate if the supervisor is an APA Fellow: Yes No

6. Indicate if the supervisor is nationally certified as a school psychologist: Yes No

Annual Updates* (For the 2011-2012 training year **ONLY)**

1. Indicate if the supervisor was a member of a professional or research society: Yes No

2. Indicate if the supervisor was the author or co-author of books, book chapters, or in peer-reviewed professional or scientific journals (*Publications "in press," "under review," or "submitted" should not be counted here*): Yes No

3. Indicate if the supervisor was the author or co-author of workshops, oral presentations or poster presentations at professional meetings: Yes No

4. Indicate if the supervisor was the Principal Investigator or Co-Principal Investigator of research grants or contracts: Yes No

5. Indicate if the supervisor was engaged in the delivery of professional services (*Involves any direct services for a client*): Yes No

6. Indicate if the supervisor was involved in leadership roles/activities in professional organizations (*e.g., Roles in local, state/provincial, regional, or national organizations*): Yes No

