Application for a Statement of Eligibility for Full Membership of the DCP, HKPS

(Revised October, 2023)

Introduction

The Hong Kong Psychological Society (HKPS) is both a learned society and a professional association. It is the only organization of psychologists in Hong Kong which represents all specialties of psychology. Its Division of Clinical Psychology (DCP) consists of the large majority of practicing clinical psychologists in Hong Kong and has been actively promoting the development of clinical psychology with regard to service, training, research and professional conditions, to the highest standards in Hong Kong ever since the establishment in 1982. Members of the DCP are bound by the Society's Code of Professional Conduct in carrying out their professional activities.

Since there is as yet no statutory registration of clinical psychologists practicing in Hong Kong, it is the responsibility of the profession in collaboration with the training institutions and the potential employers to ensure that the public are adequately protected and that only suitably qualified people are appointed to the posts of clinical psychologist. In this regard, the DCP has developed the mechanism for reviewing the training criteria for local clinical psychology programmes and for assessing individual clinical qualifications especially of those with overseas training. Moreover, consistent with the recommendation of the DCP, many potential employers may require that only those eligible for Full Membership of the DCP will be employed as a clinical psychologist in their agencies. In connection with the required professional training in the use of standardized assessment tools, such as the Wechsler Intelligence Scale for Children-Fourth Edition (Hong Kong), the eligibility for the membership of DCP has become increasingly important to the right in the use of restrictive assessment tools.

It should be reminded that this application for a Statement of Eligibility is *not* an application for the membership of the HKPS or the DCP. Application for joining the HKPS and the DCP should be made under separate cover. While it is a choice for the applicant to apply for a statement of eligibility, we highly recommend the applicant to consider applying to be a member of the HKPS and DCP.

Application and Vetting Procedures

The procedure for applying a Statement of Eligibility for Full Membership is similar to the procedure for applying Full Membership of the DCP. When an individual who has completed a

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postgraduate training in clinical psychology wishes to establish eligibility for Full Membership of the DCP, they may apply to the DCP for a Statement of Eligibility for Full Membership of the DCP. They have to complete specific application form in which they are asked to provide detailed information regarding their undergraduate and postgraduate qualifications and their training and experience in clinical psychology. The application together with the necessary document is then referred to DCP Membership Subcommittee.

The DCP Membership Subcommittee is made up of clinical psychologists who are Full Members of the DCP and appointed by the Division Committee to serve on the Subcommittee. The Subcommittee consists of one representative from either of the two local clinical psychology training programmes and experienced clinical psychologist colleagues from the various organizations that provide clinical psychological services in Hong Kong. According to the Rules of the DCP (revised in September,2005), in order to be eligible for Full Membership of the DCP, an individual must be eligible for the Graduate Membership of the HKPS and also has satisfactorily completed a course of postgraduate training in clinical psychology which covers coursework, dissertation and supervised clinical practice (or supervised training according to the Supervision Scheme) as recognized by the Division.

The DCP Membership Subcommittee meets about four times a year. Provided that sufficient information is available, the average processing time for an application is about three months.

While the DCP Membership Subcommittee will make their effort to ensure a speedy processing of the application, such processing may be delayed because of insufficient information. Therefore providing detailed information in the application form will certainly help speed up the process. It is important to note that their applications will *not* be processed if they failed to submit all the supporting documents listed in the checklist enclosed in the application form together with their application.

When the DCP Membership Subcommittee reaches a decision concerning an application, this decision will be communicated to the applicant by letter. Provided that the applicant has given written consent, the potential employing agency/agencies will also be informed of the progress and result of the application.

The DCP Membership Subcommittee's Decision

The DCP Membership Subcommittee will usually come up with one of the following decisions for an application:

1. The applicant does not hold clinical psychology qualifications as required by the DCP. The DCP Membership Subcommittee will therefore reject the application.

2. The applicant holds qualifications which are considered equivalent to those required to register as a Full Member of the DCP. The DCP Membership Subcommittee will issue a letter to the applicant confirming the applicant's eligibility for Full Membership of the DCP.

3. The applicant is invited to provide further information to prove his/her eligibility for Full Membership of the DCP as suggested by the DCP Membership Subcommittee. The applicant will be informed with a deadline for submitting such information. The applicant will be expected to respond to the invitation before the deadline, or otherwise, he/she will be considered no longer interested in the application.

Application Fee

The current application fee is HK\$1,000. It is non-refundable and must be paid in full before the application can be processed.

Enquiries

Further enquiries about the application and vetting procedures for the Statement of Eligibility for Full Membership of the DCP can be made via email to membership.dcp.hkps@gmail.com. (Note: Application with supporting documents and cheque should be sent via post to the Honorary Membership Secretary, Division of Clinical Psychology, Hong Kong Psychological Society, Unit 1211, The Metropolis Tower 10 Metropolis Drive Hung Hom Kowloon, Hong Kong.)

DCP, HKPS

October 2023

Dear applicant,

Please make sure	ALL the	following	documents	are	attached	to	the	application	form.	Otherwise,
your application v	vill not be	processed.	•							

A certified copy of certificate of undergraduate training in psychology, or equivalent
A certified copy of certificate, or equivalent, and transcript of postgraduate training in clinical psychology
Information on the accreditation status of postgraduate training in clinical psychology (if any)
Valid information about your coursework in postgraduate training in clinical psychology, e.g.
course handbooks or syllabi
Valid reference for the supervised clinical practice experience during professional training, e.g.
placement contract, log book which includes the number of working days (8 hrs = 1 working
day) in each setting, the details of each clinical supervisor and the nature of clients

Please send the completed application form and supporting documents to:

The Honorary Membership Secretary
Division of Clinical Psychology
The Hong Kong Psychological Society Unit
1211, The Metropolis Tower
10 Metropolis Drive
Hung Hom Kowloon,
Hong Kong

Yours sincerely,

Membership Subcommittee
Division of Clinical Psychology
The Hong Kong Psychological Society

☐ A copy of dissertation abstract

Statement of Eligibility for Full Membership of the DCP, HKPS

Application Form

Titl	e: Dr./	Ms/Miss/Mrs./Mr.		_
Far	nily Na	me:		_
Giv	en Nai	me(s):		_
Naı	me in C	Chinese (if applicable):		
Coı	respon	dence Address		
Tel	ephone	No(s)		
Fax	No(s)			_
Em	ail			
1	Are y	ou a member of the Hong Kong	Psychological Society	y?
	1.1	No (please note that HKPS me	mbership is a prerequi	site for DCP membership)
	1.2	Yes (please indicate your	membership categor	y)
		Fellow	Associate Fellow	
		Graduate □	Affiliate	
2	Have	you ever applied for DCP mem	bership or Statement of	of Eligibility for Full Membership of DCP?
		No (please go to item 4)		
		Yes (please fill in details)		
		Year of Application:		
		*Successful?	Yes / No	_
		*Category (if applicable):	Full / Affiliate	

^{*} Please delete as appropriate

3	Academic Qualifications (Undergraduate training)
	Please enclose valid proof of the qualifications obtained

Institution	Subjects	Degree & Classification	Date awarded	Title of thesis or dissertation

Pro	fessional _I	postgra	duate training i	n clinical psycholog	gy		
Date	es of traini	ing: Fro	om		_to		
Insti	Institute of training:						
Qua	lifications	awarde	ed:				
			information or led (if applicabl		status of this clin	ical psychology training program	me
	3.1 Academic Training in Clinical Psychology (You may enclose additional information if necessary)						
	academ	ic trans	scripts, course h	•	oi which explaine	aching received in each. If you do the courses you took, please se egree certificate.	

Name of course taken	Amount of teaching received

Name of course taken (Cont'd)	Amount of teaching received (Cont'd)

3.2 Practical experience during professional training (You may enclose additional information if necessary)

Please enclose valid reference for the practical experience acquired.

	ъ п		5	5 11 0 1	N. C
Name and location of	Dates: From / to	Name and official	Description of client groups	Description of work done, assessment and	No. of working
Organization	7 10	position of	chefit groups	therapy techniques	days
Organization		supervisor		learned	(8 hrs = 1)
		Supervisor		10411100	working
					day)

3.3 Research Work

Please provide here a brief summary of any dissertation or thesis you wrote on any empirical clinical research you undertook as part of your training. You must enclose a copy of your dissertation abstract.

4	1:0:		1 .
4	Post-qualification	fraining a	nd evnemence
-	1 Ost-qualification	u ammg a	na capenence

Please provide a summary of the post-qualification training and experience that you wish the DCP Membership Board to be aware of. Please provide supporting document for the information given below.

Name of institution	Job title	Nature of post / work / training	Nature of supervision received (if any)	Dates (from - to)

5 Membership of profession association(s) / Professional registration

Please enclose valid proof of membership and / or registration.

Name of institution	Type of membership / Registration	Dates (from - to)

6	Referees Please give the names of two referees who will be able to comment on your professional training and post-qualification training and experience.
1. Name	
	Affiliation
	Address
2. Name	
	Affiliation
	Address
7	Declaration and consent
	I apply to the DCP, HKPS for an assessment of my eligibility for Full Membership of the DCP,
	and I understand that the information given in this application is used for the purpose of this
	assessment only. I certify that the information given above is true and correct to the best of my knowledge. I have enclosed valid copies of documents for all qualifications, post-qualification
	training and experience, and professional membership. I give consent for the DCP Membership
	Subcommittee, if necessary, to confirm with the referees and any one of the institutions stated in
	this application form about the information on my qualifications, experience, and professional
	membership.

Note:

Signed _____ Date ____

¹ The completed application form and supporting documents, together with a crossed cheque of HK\$1,000, payable to the "Division of Clinical Psychology, The Hong Kong Psychological Society", should be sent to: The Honorary Membership Secretary, Division of Clinical Psychology, The Hong Kong Psychological Society, Unit 1211, The Metropolis Tower 10 Metropolis Drive Hung Hom Kowloon, Hong Kong.

Notice to Applicants

Re: Personal Data (Privacy) Ordinance

- The personal data concerning you provided to the Division of Clinical Psychology, the Hong Kong Psychological Society is collected to enable us to carry on our activities as a professional association and will be used for the purposes of:-
- (a) processing your application for a Statement of Eligibility for Full Membership of the Division of Clinical Psychology, the Hong Kong Psychological Society;
- (b) verifying with referees and any one of the institutions stated in your application form about the information you provided on your qualifications, experience, and professional membership;
- (c) informing your potential employer(s) of the progress and the final result of the assessment, provided that you have given consent in writing, and
- (d) communicating with you for such purposes.
- It is obligatory for you to supply the personal data in the form required by us. If you fail to supply the required data, your application will be declined.
- Personal data concerning you will be kept confidential and be used solely for the purposes mentioned in paragraph 1 above. Once upon completion of processing, all submissions will be disposed unless you get it back yourself before expired date specified.
- 4 You have the right to request access to the personal information concerning yourself held by the Division of Clinical Psychology, the Hong Kong Psychological Society and, following such access request, to make a request for the correction of any personal information.

Request for such access or correction should be made in writing to:-

The Hon. Secretary
Division of Clinical Psychology
The Hong Kong Psychological Society
Unit 1211, The Metropolis Tower 10 Metropolis Drive Hung Hom Kowloon, Hong Kong.

5 The Division of Clinical Psychology, the Hong Kong Psychological Society has the right to charge a reasonable fee for the processing of any data access request.