

OREGON BOARD OF PSYCHOLOGY

List Order Form

Name _____

Address _____

Phone _____

Email _____

Note: Lists are delivered in .xlsx format to the email listed above.

Types of Records Included (check one or more):

Psychologists

Residents

Applicants

Psychologist Associates

Limited Permittees

Temporary Authorizations

License Statuses Included (check one or both):

Practicing¹

Non-Practicing²

¹ *Practicing statuses include active, semi-active, and probation.*

² *Non-Practicing statuses include inactive, retired, deceased, lapsed, suspended, revoked, and surrendered under investigation.*

The standard list includes name, title, license type, license status, address, public email (if any) and phone number. Please check additional items you would like included with your request (if any):

License Number

Date Degree Conferred

Date of Licensure

Discipline (Yes or No)

License Expiration Date

Supervisor

School Attended

Gender

Please submit this form and a check for **\$35.00** to:

OBOP

3218 Pringle Road SE, Suite 130

Salem, OR 97302-6309