

## Character and Professional Fitness Disclosures for MA Counselling Psychology

In professional training, our credentialing, work, background, character, and reputation is looked at closely for “fit” with the responsibilities of taking on formal helping roles. For example, every student admitted to the MA program is legally required to submit a criminal record check before working with any client.

The following list asks a series of questions that come up in the processes of professional licensure. Here you are asked about experiences that might be related to character and personal fit with the practice of professions of counselling and psychology. Since professional training involves the provision of professional services, the background of all applicants is reviewed for fit with the responsibilities of professional practice. Please note that all the information submitted in response to these questions is treated as confidential.

Furthermore, circumstances like those listed below may arise in the lives of many competent professionals. All applicants are invited to contact the Program Manager, Carolyn Kwiatkowski ([carolyn.kwiatkowski@twu.ca](mailto:carolyn.kwiatkowski@twu.ca)) or call 604-513-2121 ext. 3909 for clarification of any of these items.

| <b>If you check “yes”, please comment on the situation(s) in the Comment section below.</b>  | <b>No</b> | <b>Yes</b> |
|--|-----------|------------|
| Have supervisors or others ever raised questions about your suitability or competence to practice counselling psychology?  |           |            |
| Have you ever been censured, reprimanded, dismissed, suspended, terminated, or asked to resign, or has any disciplinary action been taken against you during your education, training or employment?   |           |            |
| Have you ever been rejected or barred from applying for, or denied registration, certification or licensing for any other profession in any jurisdiction?  |           |            |
| Are you now, or have you ever been, disciplined, convicted, censured, reprimanded, sanctioned, suspended, disqualified, prohibited from practicing or penalized in any manner by any professional regulatory body, employer or educational institution?                                    |           |            |
| Have you ever voluntarily surrendered or renounced a license to practice any profession due to action pending or threatened?   |           |            |
| Are you the subject of a current proceeding or outstanding/unresolved complaint against your professional misconduct, incompetence, or incapacity in relation to any profession?   |           |            |
| Have you ever been found to have committed professional malpractice by a court or tribunal?  |           |            |
| Are you currently named as a defendant in any civil proceeding in which professional malpractice or negligence is alleged?   |           |            |
| Are charges pending against you in any jurisdiction for any sort of professional conduct?  |           |            |
| Have you ever been convicted, plead guilty, or plead nolo contendere to any criminal offence? If yes, provide details on the following and include a statement on whether or not you consider this conviction relevant to the profession of psychology: Nature, date, place of conviction. |           |            |
| Has there ever been a finding of contempt of court made against you, or have you ever been found to have contravened or failed to comply with any order of any Court?  |           |            |
| Is there any event, circumstance, condition or matter touching on your conduct, character, or reputation which you believe might raise a significant material concern for you?   |           |            |
| Are you currently affected by any physical or mental condition that in any way impairs or limits your ability to practice counselling psychology with safety to the public?  |           |            |
| Do you have any drug or alcohol addictions that in any way impair your ability to practice counselling psychology with safety to the public?   |           |            |
| Do you have any pre-existing or current condition of a disability, physical ailment, emotional disturbance or an addiction of any kind that might impair your ability to practice or complete program requirements?  |           |            |



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I \_\_\_\_\_ certify that the above information is accurate and complete.  
Should I furnish any false or misleading information on this declaration, I understand that such act may constitute cause for denial, suspension or deregistration.

I declare that I have disclosed in writing any criminal convictions or criminal charges as part of this application.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Comments:

READ ONLY