



USING THESE INSTRUCTIONS

READ and understand all application instructions and requirements **BEFORE** you complete your application. **Failure to follow the instructions can result in your application being denied, or deferred to a later exam date.** Throughout these instructions, an asterisk (*) indicates available supporting documents. Visit our website at www.uspra.org to download.

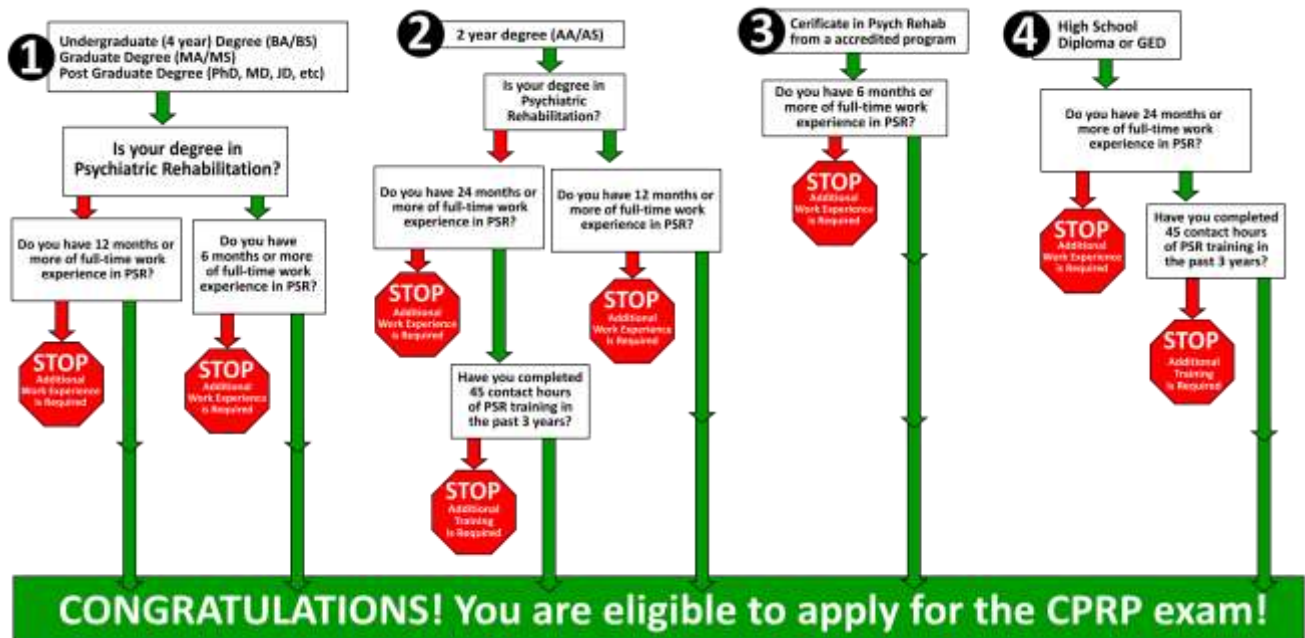
ELIGIBILITY CRITERIA

In order to be approved to sit for the CPRP Examination you must:

1. Meet eligibility requirements for education, work experience, and training, in one of the pathways below (reading across one numbered row);
2. Provide a signed a statement agreeing to abide by USpra Practitioner Code of Ethics; and
3. Submit the appropriate application and examination fees.

Required experience, education, and training must be accumulated prior to submission of your application.

To determine your eligibility pathway, follow the arrows in the chart below. Start with your highest level of education and respond to each question below. If you answer yes, follow the **GREEN** arrow to the next question. If no, follow the **RED** arrow.



PLEASE SEE THE USpra WEBSITE FOR UPDATED FEE SCHEDULE, EXAM DATES & APPLICATION DEADLINES

- Applications submitted after the application deadline will incur a late fee.
- Applications submitted after the late deadline will be evaluated for the next exam date. **NO EXCEPTIONS.**
- Incomplete applications will incur additional fees.
- Exam dates and fees are subject to change without notice



ACCESSING THE NEW ONLINE APPLICATION

The Certification Commission has collaborated with Professional Credential Services, Inc to offer a new and improved exam application process. To access the online application visit www.pcshq.com and follow the steps below:

- Step 1. Click the blue box marked "Candidates"*
- Step 2. Click "Health Professions"*
- Step 3. Click "U.S. Psychiatric Rehabilitation Association"*
- Step 4. Complete each section of the application. **Items marked "★" are required.***
- Step 5. Enter Payment information.*
- Step 6. Mail your supplemental materials to complete your application.*

SECTION 1. PERSONAL INFORMATION, EXAM DATE SELECTION & SPECIAL ACCOMODATION REQUESTS

Provide complete contact information, including mailing address to which ALL CPRP related materials will be mailed. A home address is preferred. Provide contact information, including phone numbers at home and work, date of birth and mothers maiden name. This information is used for security purposes by our test administrator. As most CPRP communications are done electronically, **an email address is REQUIRED**. If you do not have email, you can obtain a free account from websites such as Yahoo!, Hotmail, and Google Mail.

NOTE: It is your responsibility to keep certification program staff informed of your current mailing and email addresses. This will ensure that you receive related correspondence, certification updates, training information and CPRP renewal notices. The CPRP program cannot be responsible for lost, delayed or misdirected mail.

Choose from the available test dates listed on the application. The CPRP Exam is offered three times each year. Traditionally these exams are offered in March, June and October. The test is offered at computer testing centers worldwide. See the USpra website at <http://www.uspra.org> or the Prometric website at <http://prometric.com/uspra> for a current list of testing centers. The fee charged will be based on the exam date you select and the date you complete the application. Please be sure to note application deadlines and all applicable fees associated with these various dates.

NOTES: (1) Applications received without payment will NOT be processed until payment is received. (2) Fees are subject to change without notice. (3) **All application fees are non-refundable and non-transferable.**

Special Accommodations

If you require special accommodations during the CPRP examination due to a medical condition, please specify this on the application. You will be required to submit further documentation to qualify for a special accommodation. For details, please contact USpra at certification@uspra.org.

CLICK NEXT...



SECTION 2. WORK EXPERIENCE

Document your work experience in Psychiatric Rehabilitation services for adults (18 years and older) with serious mental illness (e.g., working as a case manager, vocational counselor, independent living support counselor, residential treatment counselor or club house staff). Supervision, administration, consultation, and training in Psychiatric Rehabilitation are also considered work experience. Upon request, you may be asked to provide a copy of your job description. In these cases, the description of your major duties will be used to ensure the work was in the field of Psychiatric Rehabilitation. **Only work experience completed on or before the application date will be considered in the calculation of applicable experience.**

Regarding Part-time work: Work experience is calculated in full-time equivalents; e.g. 40 hrs per week for one year is considered one-year experience; 20 hrs per week for two years is considered one year experience, and so on.

Regarding Volunteer and unpaid work experience: Up to 50% of your reported work experience may have been provided as a volunteer in a rehabilitation program. **NOTE:** All of the above requirements for work experience must be met during the volunteer experience.

When completing the “Work Experience” section of the application, indicate your job/position title, whether the position is paid or unpaid, the primary function of your position, and your employment start date. The employment end date is required only if you are no longer in the position. Be sure to include the agency name, address, phone number and your supervisor’s name and title.

All positions must be:

- ✓ related to provision of recovery-oriented services for adults with serious mental illness;
- ✓ regularly scheduled & evaluated;
- ✓ supervised by a CPRP or psych rehab practitioner (or be directly accountable to the governing board of a psychiatric rehabilitation facility or program); and
- ✓ have a job description

CLICK NEXT...



SECTION 3. FORMAL EDUCATION & ACADEMIC PREPARATION

The education level reported in this section will determine the remaining Work Experience and Training requirements you must meet in order to be eligible for the CPRP exam. Refer to the chart on Page 1 of these instructions for complete details. **List only your highest COMPLETED diploma, degree or professional certificate.** Indicate the type/level of education completed, your name as it appears on the official transcript/diploma, the name of the educational institution, the year the degree/program was completed, and your primary area of study. Indicate whether or not the degree/certificate was specifically in Psychiatric Rehabilitation (this is rare). Provide the address, city, state and postal code of the education institution.

CLICK NEXT...

SECTION 4. TRAINING IN PSYCHIATRIC REHABILITATION

Nearly all candidates will be required to document 45 Contact Hours* of education and training in Psychiatric Rehabilitation. Candidate who hold a Certificate in Psychiatric Rehabilitation or and Associates degree or higher in Psychiatric Rehabilitation are exempt from this requirement.

Training events **must** be in the form of a structured educational activity, sponsored by an identifiable educational provider (sponsor) and planned and presented by qualified personnel. An identifiable provider may be an organization, chapter, or academic institution that provides education and training in

Psychiatric Rehabilitation. The training event must have written learning objectives that are measurable, learner-centered and achievable within the timeframe of the activity.

Each training must have a minimum of 30 minutes of instructional time on content that:

- 1) addresses at least one of the seven domains of the CPRP (see Exam Blueprint) OR professional ethics **and** be consistent with the principles and values of psychiatric rehabilitation, person first language, and multi-cultural principles;

CPRP Domains:

- | | |
|--|--|
| I. Interpersonal Competencies | II. Professional Role Competencies |
| III. Community Integration | IV. Assessment, Planning, and Outcomes |
| V. Interventions for Goal Achievement | VI. Systems Competencies |
| VII. Diversity and Cultural Competencies | |

- 2) corresponds to the stated learning objectives;
- 3) provides an opportunity for interaction between presenters and participants
- 4) makes available mandatory post-tests for participants of asynchronous online courses; credit contingent on the participant successfully passing exam.



Training activities must be presented by a qualified instructor who meets **at least one** of the following criteria:

- 1) An individual who holds a current CPRP and has successful experience as an instructor in the human services field;
- 2) An individual who holds another license or certification in a mental health profession and a minimum of 5 years experience working in psychiatric rehabilitation;
- 3) An individual who has authored publications within the past five years on topics within the domain(s) being presented.

Identifying Relevant Training Topics:

- For purposes of the CPRP application, PSR training must address *“the treatment and/or rehabilitation of adults with serious mental illness”* (see the **CPRP Exam Blueprint**, available on the USPRA Website or by request). **This would include topics on direct care, vocational or life skills training, crisis intervention, treatment modalities, medications, diversity, ethical/legal issues, etc.**
- Related topics such as infection control, dealing with medical complications, etc., are also acceptable **if presented in the context of psychiatric rehabilitation practice.**
- Trainings must be on a topic relevant to the treatment of ADULTS. **Trainings addressing the treatment of CHILDREN/ ADOLESCENTS will NOT be counted.**
- Instruction on the use of a treatment modality in opposition to a Recovery-based philosophy ARE NOT ACCEPTABLE (e.g., use of restraints, involuntary commitment).

Examples of topics that will NOT count:

- CPR/First aid
- Fire safety
- Disaster training
- Materials handling/MSDS
- Driver education (for transport vans)
- Training on computer software
- Agency Specific Training
- Topics specific to Children/Adolescents
- Autism Spectrum Disorders
- Human Development
- Alzheimer’s Disease
- HIV/AIDS
- Domestic Violence/Abuse
- Death and Dying
- Internships
- Courses taken towards a completed degree (Associates, Bachelors, Masters, etc...)
- Staff meetings / Retreats
- Routine coaching, training, or supervising staff

The content of these sessions, while useful, does not address the practice domains identified for the CPRP credential.



Completing the Online Form

If your eligibility pathway does not require Psychiatric Rehabilitation Training (this is rare), indicate so and **CLICK NEXT** to continue the application process.

If your eligibility pathway requires continuing education/training in Psychiatric Rehabilitation document all trainings **individually** on the online form. **Include only training attended within the three years immediately preceding submission of your application.** You may include in-class training, certain self-study, distance learning, e-learning and college level courses taken toward an **uncompleted degree**. Repeat trainings/presentations will NOT be accepted.

When reporting trainings, you must include the training topic, the number of contact hours earned, the presenters names and qualifications/credentials, the sponsoring organization, the date and location of the training and phone number and indicate which domain(s) the training applied to (check all that apply). Once a training log is complete, **CLICK "ADD MORE TRAINING"** to add another form. Repeat the process until all trainings have been reported.

DO NOT report hours in the form of credits or CEUs.

DO NOT submit certificates of attendance; program staff if necessary will request these.

Calculating Credit Earned

Count 1 contact hour of training credit for each 60 minutes of instructional time (60 minutes = 1 contact hour; 30 minutes = 0.5 contact hours). **Do NOT include breaks, lunches or "homework" time.**

After completing the training log, **CLICK NEXT...**

SECTION 5. PERSONAL & PROFESSIONAL RESPONSIBILITIES

Licensing: If you have had a license, registration or certification revoked, been sanctioned in any way, or are presently under review for possible sanction, answer the questions on the application form truthfully and provide a description of the situation. Include the date, circumstances, and current status. Information about revocation of professional licenses or credentials or professional sanction will be reviewed by the Certification Commission to determine if the situation indicates unprofessional or unethical behavior which could be harmful to persons receiving services. If such a determination is made the application may be denied.

Ethical and Legal Obligations: You must sign an agreement to abide by the *Psychiatric Rehabilitation Practitioner Code of Ethics* and agree to abide by the laws and statutes of the jurisdiction in which you practice. If this agreement is not signed, your application will not be processed. The Code of Ethics is available for download on the USPRA website.



Disclosure of Information: The Commission maintains a public record of all currently certified individuals including name, certification date, expiration date, address, email address and daytime telephone number. This list is available upon request to all state chapters and affiliates of USPRA. Should you wish to be excluded from this list, you must indicate so by opting-out of the list at the time of application. Under no circumstance will the Commission sell the list to any third party vendor.

CLICK NEXT...

SECTION 5. SIGNATURE AND VERIFICATION

Provide your digital signature and date your application prior to submitting. Applicants are expected to provide truthful and complete information. Any application found to contain fraudulent information (through omission or misrepresentation) will not be considered for the Certification Program.

CLICK NEXT...

SECTION 6. REVIEW

This section of the application process will provide you with an opportunity to review your application in full prior to submitting. Once you are satisfied that you have provided all of the necessary information, respond to the final question to submit your application. If you will be paying by check, please print this page to include with your payment.

CLICK NEXT...

SECTION 7. PAYMENT

The preferred method of payment is credit or debit card submitted at the time of application. Payments may be made by check if a credit or debit card is not available or in cases where an agency is paying for multiple applicants. In this event, the candidate must complete the full application and print a copy of the review page. At the payment page, the candidate may simply close the application site. The application will be saved and cued for review once payment is received.

Checks are to be made payable to "Professional Credential Services, Inc." When mailing a check payment, include a list of applicants, along with a print out of their application review page(s) from the online application system. Applications will not be reviewed until paid in full.

CLICK SUBMIT... print payment page for your records.

**SECTION 8. SUPPLEMENTAL MATERIALS**

Employment Verification: The Employment Verification (EV) Form is required to document the psychiatric rehabilitation experience relative to your eligibility criteria (see Eligibility Chart, Page 1). A separate EV is required for each position/employer to document your eligibility; e.g., if you held two or more jobs within the past year you will need an EV form for each of those jobs/employers.

NOTE: All supplemental information (transcripts & employment verification forms) MUST be received by the APPLICATION DEADLINE DATE

The applicant is responsible for having the form completed by the employer(s). The employer(s) should return the form to the applicant in a sealed envelope with their signature across the back of the envelope flap. Make copies of the form as needed. **Employment verifications not submitted in a sealed envelope with signature across the seal will be returned to the applicant for re-submission.**

Official Transcript: The Certification Commission requires proof of education in the form of an original/official transcript from the education institution. You **MUST** request a copy of the transcript from your educational institution, providing ample time for processing. Applications will not be processed until official transcripts are received. **Faxed copies of the transcript are NOT acceptable.** Universities may send official electronic transcripts to certification@uspra.org or uspra@pcshq.com.

Complete your application online at:

<https://pcshq.com>



Mail your supplemental application materials or check payments to:

Professional Credential Services / USpra Certification

P.O. Box 198768

Nashville, Tennessee 37219-8768

All supplemental information (transcripts & employment verification forms) MUST be received by the APPLICATION DEADLINE DATE

QUESTIONS?

Exam Eligibility: call USpra at 703.442.2078 or email certification@uspra.org

Application Status: call PCS at 1-877-887-9727 or email uspra@pcshq.com

USpra Membership: call USpra at 703.442.2078 or email info@uspra.org

USpra Education & Training: call USpra at 703.442.2078 or email education@uspra.org