

*Fellow Emeritus status is available to ABPsa Fellows who, regardless of whether they remain licensed in their mental health discipline, have and remain **completely** retired from the practice of psychoanalysis, as well as any other psychotherapeutic activity, with patients. Licenses and other professional affiliations must be in good standing upon retirement and remain so. The American Board of Psychoanalysis does not certify Fellow Emeritus in the active practice of psychoanalysis.*

Please complete the following application and submit the one-time fee of \$350 made payable to the American Board of Psychoanalysis (ABPsa) to the address listed below. Please print legibly.

APPLICATION TO TRANSFER TO FELLOW EMERITUS

Name _____ Degree _____ Date of Birth _____

I completely retired from practice on _____, and I no longer see patients.

My license is still active is inactive is expired this change occurred on _____ date

Since the submission of your most recent ABPsa application or renewal application, as the case may be: (a) have you been the subject of a complaint, charge, inquiry, investigation, review, administrative or regulatory proceeding or any other proceeding that resulted in a determination that your conduct violated a code of professional ethics, standard of professional conduct or other standards governing your professional conduct, regardless of whether the consequence was in the nature of a cautionary or warning letter, admonition, reprimand, censure, license suspension, license revocation, or limitation, denial or revocation of privileges, injunction, order or any other form of sanction; or (b) are you currently the subject of any such complaint, charge, inquiry, investigation, review or any other similar proceeding? YES NO

If your answer to the forgoing questions is yes, for each case or instance, attach as applicable: (i) an explanation of the underlying facts and circumstances, as well as of the outcome, disposition, discipline, order or sanction by each and every agency, authority, professional society, or professional association that considered the matter; (ii) copies of the pertinent documentation showing the nature of the alleged violation(s) and the final disposition(s); and (iii) the name and contact information of your attorney, representative, regulatory official or other person(s) who may be contacted for additional information. Note: If this information is about a currently pending matter, please respond to the extent you are able to do so after consultation with your attorney, if any, and indicate the status of the matter and the anticipated date of a final resolution.

Home Address _____ City _____ State _____ Zip _____

Home Telephone Number _____ Cell Phone Number _____

Email _____ Other _____

I hereby affirm, by signing this application, that:

- I have retired completely from the practice of psychoanalysis and any other psychotherapeutic activity with patients; my license and professional affiliations are in good standing as of the date of my retirement;
- I will promptly inform ABPsa of any future change in the information provided including without limitation address, retirement status and ethical or professional good standing;
- I understand that Fellow Emeritus status does not mean I am currently certified and I shall no longer use the FABP credential and/or advertise or state that I am certified by the American Board of Psychoanalysis; and
- to the best of my knowledge, after diligent review of my professional history and current circumstances, the information and statements in this application are true and correct.

Fellow's Signature _____ Date _____

Mail Completed form to:

ABPsa
501 S. Cherry Street, Suite 1100
Denver, CO 80246

Office Use Only:	
Date Received	
Check #	