EMERGENCY PRACTICE REGISTRATION FORM

A psychologist providing disaster or emergency services in Alabama must register with the Alabama Board of Examiners in Psychology within ten (10) business days of entering the State by filing this Emergency Practice Registration Form with the Board Office. Said individual must be licensed to practice psychology in another jurisdiction, and must be providing services in response to a declared disaster or state of emergency, and shall practice in Alabama for no more than sixty (60) days per year, without applying for a license. A person violating this rule shall be considered practicing without a license and shall be subject to disciplinary action.

1. **Personal Information**

   Name: ____________________  
   Last                  First        Middle

   Business Address: ____________________  
   Organization

   Street: ____________________  
   City: ____________________  
   State: ____________________  
   Zip: ____________________

   Home Address: ____________________  
   Street: ____________________  
   City: ____________________  
   State: ____________________  
   Zip: ____________________

   Telephone: Business (_____) _____ - _______  Home/Cell (_____) _____ - _______

   Preferred Contact Method: (check one)   _______ Business #   _______ Home/Cell #

   Email Address: ____________________  @

2. **Jurisdiction of Licensure**

   State: ____________________  
   License or Certificate Number: ____________________

   Date of issuance: ____________________  
   Expiration Date: ____________________

   Jurisdiction’s Contact Telephone Number: (_____) _____ - ______

   By signing below, I certify that my license or certificate to practice psychology the state or province of ____________________ is active and in good standing.

   ____________________  
   Signature

   ____________________  
   Date

   **The Following Questions Must Be Answered:**

   1. Are you practicing in the State of Alabama in response to a Level I declared disaster?   _______ Yes   _______ No

   2. What is the declared emergency or disaster situation? ____________________
3. On what date did you commence practice in the Alabama?

4. On what date do you anticipate practice in Alabama will cease?
   
Pursuant to Code of Ala. 1975, §34-26-41(g), this date must be within sixty (60) days of the date practice commenced.

   Indicate any and all Emergency Support Functions with which you are, or will be, working:

<table>
<thead>
<tr>
<th>✓ Here</th>
<th>Emergency Support Function*</th>
<th>Scope</th>
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<tbody>
<tr>
<td>ESF #1 – Transportation</td>
<td>Primary Agency: AL Emergency Management Agency</td>
<td>State and civil transportation support; Transportation safety; Restoration/recovery of transportation infrastructure; Movement restrictions; Damage and impact assessment</td>
</tr>
<tr>
<td>ESF #2 – Communications</td>
<td>Primary Agency: AL Emergency Management Agency</td>
<td>Coordinate with Telecommunications and IT Industry; Restoration/repair of telecommunication infrastructure; Cyber and Information Technology; Oversight of communications within the State incident management and response structure</td>
</tr>
<tr>
<td>ESF #3 – Public Works and Engineering</td>
<td>Primary Agency: AL Dept. of Transportation</td>
<td>Infrastructure protection and emergency repair; Infrastructure restoration; Engineering services, Construction Management; Critical Infrastructure Liaison</td>
</tr>
<tr>
<td>ESF #4 – Firefighting</td>
<td>Primary Agency: Forestry Commission</td>
<td>Firefighting activities on State lands; Resource support to wild land, rural and urban firefighting operations</td>
</tr>
<tr>
<td>ESF #5 – Emergency Management</td>
<td>Primary Agency: AL Emergency Management Agency</td>
<td>Information collection, analysis and dissemination; Reports, bulletins, advisories and assessments; Action planning and tracking; Resource tracking; Science and Technology support (modeling, information provision and interpretation)</td>
</tr>
<tr>
<td>ESF #6 – Mass Care, Emergency Assistance, Housing &amp; Human Services</td>
<td>Primary Agency: Dept. of Human Resources</td>
<td>Mass care; Emergency assistance; Disaster housing; Human Services</td>
</tr>
<tr>
<td>ESF #7 – Logistics Management &amp; Resource Support</td>
<td>Primary Agency: AL Emergency Management Agency</td>
<td>Resource support; Logistics planning, management, and sustainment capability</td>
</tr>
<tr>
<td>ESF #8 – Public Health &amp; Medical Services</td>
<td>Primary Agency: Dept. of Public Health</td>
<td>Public Health; Medical; Disaster Mental Health services; Assays, disease models; Mortuary Services; Radiological Incidents</td>
</tr>
<tr>
<td>ESF #9 – Search and Rescue</td>
<td>Primary Agency: AL Emergency Management Agency</td>
<td>Lifesaving assistance; Search and rescue operations</td>
</tr>
<tr>
<td>ESF #10 – Oil and Hazardous Materials Response</td>
<td>Primary Agency: Dept. of Environmental Management</td>
<td>Oil and hazardous materials (chemical, biological, etc.) response; Environmental safety and short- &amp; long-term cleanup</td>
</tr>
<tr>
<td>ESF #11 – Agriculture &amp; Natural Resources</td>
<td>Primary Agency: Dept. of Agriculture &amp; Industries, Dept. of Conservation &amp; Natural Resources</td>
<td>Nutritional services; Food Safety and Security; Animal and plant disease/pest response; Natural and Cultural resources and historic properties protection and restoration; Safety and well-being of household pets</td>
</tr>
<tr>
<td>ESF #12 – Energy</td>
<td>Primary Agency: ADECA</td>
<td>Energy infrastructure assessment, repair/restoration; Energy industry utilities coordination; Energy forecast</td>
</tr>
<tr>
<td>ESF #13 – Public Safety &amp; Security</td>
<td>Primary Agency: Dept. of Public Safety</td>
<td>Facility and resource security; Security planning and technical resource assistance; Public safety/security support; Support to access, traffic, and crowd control</td>
</tr>
<tr>
<td>ESF #14 – Long-Term Community Recovery</td>
<td>Primary Agency: Governor’s Office</td>
<td>Social and economic community impact assessment; Long-term community recovery assistance; Mitigation analysis and program implementation; Coordinate NGOs and Private organizations</td>
</tr>
<tr>
<td>ESF #15 – External Affairs</td>
<td>Primary Agency: AL Emergency Management Agency</td>
<td>Emergency public information and protective action guidance; Media and Community Relations; Legislative Affairs; Tribal Affairs</td>
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</tbody>
</table>

If other (i.e. Private Sector organization or Non-Governmental organization such as the American Red Cross, or the Salvation Army), provide a description:

<table>
<thead>
<tr>
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<th>Scope:</th>
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5. Where will you be working? ____________________________________________

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<tr>
<th>Organization</th>
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<tr>
<td>Street</td>
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**AFFIDAVIT**

By submission of this **Emergency Practice Registration Form**, I acknowledge that Alabama Law prohibits the practice of psychology in Alabama without an active license issued by the Alabama Board of Examiners in Psychology, *except* for under lawfully qualifying circumstances and, in those circumstances, for a specific and limited period of time only.

Any person violating this rule shall be considered practicing without a license and shall be subject to disciplinary action by the Board and/or the Alabama Attorney General’s Office of Consumer Protection.

By signing below, I certify that all information which I have given herein to be true, correct, and complete to the best of my knowledge.

______________________________
Signature

______________________________
Date

*A photocopy of this Affidavit may serve as the original.*

**NOTARIZATION:**

**STATE OF** ________________________________

**COUNTY OF** ________________________________

BEFORE ME, the undersigned authority personally appeared ________________________________ who, after being duly sworn, depose and says that the foregoing (and any attached statement) is true and correct to the best of his/her knowledge and belief.

______________________________
NOTARY PUBLIC Signature

______________________________
SEAL

______________________________
Date

**IN THE EVENT THAT A NOTARY IS IMPOSSIBLE TO FIND:**

By signing below, I certify that it was impossible to have this form notarized due to disaster and/or emergency circumstances, and I certify that all information which I have given herein to be true, correct, and complete to the best of my knowledge.

______________________________
Signature

______________________________
Date

* Disaster and emergency recovery actions are keyed to help individuals and communities return to a normal or better condition than before the incident. Disaster Recovery Centers are staffed with knowledgeable personnel to provide recovery program information, advice, counseling, and related technical assistance to the citizens of Alabama. When an Emergency Support Function agency is activated, they participate in planning for short- and long-term incident management and recovery operations.