

Licensure Unit
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## APPLICATION For Approval to Take the EPPP Examination

(Psychology)

To be eligible to take the EPPP examination, you must hold a provisional psychology license in Nebraska

SECTION A: PERSONAL INFORMATION								
1	You must print your <b>Legal Name</b> below							
	First:		Middle:		Last Name:			
2	Address: (where we can send information)	Street/PO/Route:						
	·	City:			State or Co	ountry:	Zip:	
4	Phone #: (optional)*			Additional Phone #: (optional)*				
5	E-Mail Address:	-Mail Address:						
	* phone number and e-mail is optional, but providing this information will speed up communication with you							
6	Provisional Psychology License #:							
SECTION B: SIGNATURE								
I am requesting approval to take the Examination for Professional Practice in Psychology (EPPP) examination.								
(Signature of Applicant) Date								