

Psychological Assessment Plan
VA Chicago Health Care System

Fill form out ONLY if you DO NOT meet all the minimum psychological assessment requirements of this site.

	Number as of application date	Requirement
MMPI-2	_____	10
WAIS-III	_____	10
Total adult integrated reports	_____	6

We require that all applicants have a plan to achieve our psychological testing requirement prior to the internship start date for their applications to be considered. Please talk to your academic director of training and work out a plan to accomplish this. Please describe this plan very briefly below:

Sign below, please. All signatures are required.

Applicant signature

Applicant name printed

Academic DCT signature

Academic DCT name printed