

Need instructions/labels for any required fields.

This sentence gets lost here. It would be more effective in the name section on the right side as is currently done in MyAPA. Replace text with "List only my name. Please do not publish my contact or professional information."

Entire form ideally should be aligned to the left side of the page, but not as critical if the form elements are left-aligned.

Instructions here are repetitive with instructions within the form.

Red text should be reserved for errors only. Error messages should appear next to input fields and at the top of the page, especially since this is a long form. Text currently in red could be displayed in black bold text.

Replace uneditable fields with listing of member name only and instructions on how to change

Place a button in this section to add a second address instead of displaying fields - will save space on the form. This applies to all

Move the labels and input fields to the left so the entire section lines up with the blue headers and are not centered.

Remove 1s and 2s from labels. Maybe put First and Second in section headers or Primary and Secondary. Use subheadings to distinguish entries: First Directory Address, Second Directory Address, etc. This applies to all applicable fields with numbered labels. These numbered labels are probably used as attribute names in the database.

Labels should ideally be aligned on top of the input field. The next preferable alignment is to the left (see section 9).

Suppressing field questions could be placed in a separate column on the right side of the form or maybe placed in the blue header. They would preferably be placed on the right side of the page as is done in MyAPA.

APA Directory Update

Please take a few minutes to update/verify your information in the **APA Membership Directory**. APA requests that members update their directory listing as life changes occur, or at least annually. The information you provide will be listed in the **APA Membership Directory**. By rule, the **names** of all APA members and affiliates will be automatically published in the directory. **If you wish to have APA publish *only your name* (i.e., suppress all other information) in the directory, please place a checkmark here:**

You will also be able to suppress certain features of your directory listing such as your phone number and/or email address. See the "suppress" from directory option at the bottom of the numbered sections.

The **APA Membership Directory** is accessible to APA members and affiliates only. It is not open to the general public. Your email address will not be shared with outside third parties at any time.

If the information reported below is current, the only step you need to take is to click the "no changes" button at the bottom of the form. By clicking no changes, we will put the date that you have reviewed the information into your record. This helps us to know that your information is current.

Please note:

If you select an "other" category from one of the drop-down lists (e.g. area of interest, major field), you will be required to specify your response in the provided text box.

What is the purpose of the APA ID in the Name header?

1. Name APA ID: 81964318

Name changes are updated by your submitting proof of change (e.g., marriage license, driver's license, or other legal document) to the APA Directory Office at directory@apa.org or by fax to 202.216.7628 or by mail to American Psychological Association, 750 First Street, NE, Washington, DC 20002-4242.

Prefix	First	Middle	Last	Personal suffix (e.g. Jr, Sr)	Professional suffix (e.g. PhD, PsyD)
<input type="text"/>	David	I	Davamony	<input type="text"/>	PsyD

An optional cross-reference to a former name may be included in the Directory for those whose names have changed. If a former name is given, please confirm whether or not it should be published

FORMER NAME:	First	MI	Last
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Suppress former name from directory? Yes No

2. Directory Address 1 (You may list up to two addresses)

Directory Address indicator 1: Office Home Both

Country 1: United States

Department 1:

Institution / Firm name 1:

Street address 1: 1016 La Feliz Dr

City 1: Redlands

State / Province 1: California -- Please Select --

U.S. zip/ Canadian zip / International post code 1: 92373

Suppress address 1 from directory? Yes No

2a. Directory Address 2

Directory Address Indicator 2: Office Home Both

Country 2: United States
(Select a country ONLY if you are completing Directory Address 2)

Department 2:

Institution / Firm name 2:

Street address 2:

City 2:

State / Province 2: -- Please Select -- -- Please Select --

U.S. zip/ Canadian zip / International post code 2:

Suppress address 2 from directory? Yes No

3. Phone and Fax Numbers

Office phone number 1: (909) 496-8810 Ext: Fax number 1:

Suppress office phone number 1 from directory? Yes No

Suppress fax number 1 from directory? Yes No

Office phone number 2: Ext: Fax number 2:

Suppress office phone number 2 from directory? Yes No

Suppress fax number 2 from directory? Yes No

Home phone number: (909) 792-0927

Suppress home phone number from directory? Yes No

Remove numbers from heading titles.

4. Email Address and Personal Web Page

Your email address will not be shared with outside third parties at any time.

Email address: ddavamony@gmail.com

Re-enter email address: ddavamony@gmail.com

Suppress email address from directory? Yes No

Personal Web Page URL:

Place a note here indicating that updating this email address also updates the email associated with the user's MyAPA account.

5. Date of Birth

Date of birth: 09/02/1956 (mm/dd/yyyy)

This information will not be published in the directory. APA collects and uses date of birth to distinguish among members with identical names.

6. Highest Earned Degree

Degree changes are updated by your submitting proof (e.g., copy of degree, transcript) to directory@apa.org or by fax to 202.216.7628 or by mail to American Psychological Association, 750 First Street, NE, Washington, DC 20002-4242.

Year of highest degree: 2000 (e.g. 2012)

Degree name (e.g. PhD, PsyD): PsyD

Degree major field (the field of your highest degree): Clin Psychol

Certifications (CAGS, CGP):

Granting institution (institution from which you received your highest degree): Loma Linda Univ (CA)

Have the "other" box appear only if the user selects "other." This applies to all instances of fields with an "other" option.

7. Current Major Field

Please specify the field in which you are currently working: --- Please Select ---

If you selected "other" in the above list, please specify:

8. Psychological Areas of Interest

Primary area of interest: --- Please Select ---

If you selected "other" in the above list, please specify:

Secondary area of interest: --- Please Select ---

If you selected "other" in the above list, please specify:

9. Licensure (as a psychologist)

License changes are updated by your submitting proof (e.g., copy of state license) to directory@apa.org or by fax to 202.216.7628 or by mail to American Psychological Association, 750 First Street, NE, Washington, DC 20002-4242.

Are you licensed as a psychologist by a state or provincial psychology board? (US/Canada Only): Yes No

If NO, are you planning to pursue a license to practice as a psychologist? Yes No

If LICENSED, are you authorized by these credentials to engage in the independent practice of psychology? Yes No

Do you wish to have "private practice" listed in the APA Membership Directory? Yes No

Below is the information we have currently on file:

State / Province of licensure 1: California

Show only state or province drop-down based on the country the user selects.

10. State, Provincial, and Territorial Association Membership(s)

Please tell us if you have an SPTA membership by selecting the country and state, or country and province, or territory in which you are a member. If you do not have an SPTA membership to list, please leave the country item set to "--not applicable--".

Country where you have an SPTA membership 1: -- Not Applicable --

State / Province of membership 1: -- Please Select -- -- Please Select --

Country where you have an SPTA membership 2: -- Not Applicable --

State / Province of membership 2: -- Please Select -- -- Please Select --

Country where you have an SPTA membership 3: -- Not Applicable --

State / Province of membership 3:

-- Please Select -- -- Please Select --

11. Current and Previous Work/Employment (starting with current)

Are you retired, in private practice, or self-employed?

Place instructions within the form rather than taking users to another page.

Please click [HERE](#) for information about inserting new employment entry

Insert New Employment Entry Undo Insert

Current position title: Mental Hlth Consit

Current department / division:

Current institution or firm name: Self-Empl

Start year: 2005 (e.g. 2012)

End year: (e.g. 2012)

Country: -- Please Select --
(Select a country ONLY if you are completing current employment)

City:

State / Province: -- Please Select -- -- Please Select --

U.S. zip/ Canadian zip / International post code:

Suppress current employment from directory? Yes No

Other current or previous position title 2:

Other current or previous department / division 2:

Other current or previous institution or firm name 2:

Start year 2: (e.g. 2012)

End year 2: (e.g. 2012)

Suppress employment 2 from directory? Yes No

Other current or previous position title 3:

Other current or previous department / division 3:

Other current or previous institution or firm name 3:

Start year 3: (e.g. 2012)

End year 3: (e.g. 2012)

Suppress employment 3 from directory? Yes No

12. Please allow up to 48 hours for the information to appear in the *APA Membership Directory*. You will receive a receipt confirmation once your form has been submitted. To check your listing online, please visit: <http://my.apa.org>. If you forget your user name and password, please contact membership@apa.org or call [1-800-374-2721](tel:1-800-374-2721) or [\(202\) 336-5580](tel:202-336-5580).

To learn more about the directory, please visit: <http://www.apa.org/pubs/databases/directory/index.aspx>.

I certify that the above information is correct: Yes No

Submit No Changes

Provide link to send users directly to the directory (in email as well) or tell users where to access the directory from MyAPA

Change the input field from radio buttons to a checkbox. Is there an advantage to having it as "Yes" or "No"?

© 2013 American Psychological Association

750 First Street NE, Washington, DC 20002-4242

Telephone: [800-374-2721](tel:800-374-2721); [202-336-5500](tel:202-336-5500). TDD/TTY: 202-336-6123

[Home](#) | [Contact APA](#) | [Press Room](#) | [Help](#) | [APA PsycNET®](#) | [Privacy Statement](#) | [Terms of Use](#) | [Accessibility](#) | [Advertise](#) | [Site Map](#)