

**PREVENTION CERTIFICATION
SUPERVISION DOCUMENTATION/EVALUATION LETTER**

**Form V
Rev. May 2009**

TO BE COMPLETED BY SUPERVISING CPS

NOTE: Give the form and a stamped, addressed envelope to your supervising CPS. The supervising CPS must complete the form and send it directly to the KCBPP office. If you had more than one supervising CPS, please make copies of the form.

TO: Supervising CPS _____

FROM: Applicant _____

I am applying to the Kentucky Certification Board for Prevention Professionals for certification as a Prevention Specialist in Kentucky.

As a professional who has observed my work in the field of Prevention, I would like to ask for your help in providing documentation of my supervision. My application for credentialing will not be accepted until all my documents are received. I appreciate your assistance in completing and signing the supervision documentation.

Please mail directly to:

**KCBPP
219 Old Towne Road
Louisville, KY 40214-4370**