



BOARD OF BEHAVIORAL SCIENCE EXAMINERS

1021 O STREET, SACRAMENTO, CALIFORNIA 95814  
TELEPHONE: (916) 445-4733  
From L.A. area: (213) 620-2814



FOR OFFICE USE ONLY

Date: \_\_\_\_\_

Approved by: \_\_\_\_\_

HYPNOSIS EXPERIENCE

I certify under penalty of perjury under the laws of the State of California that I have supervised:

Applicant's Name DIANNE RUTH LITTLE MFCC# \_\_\_\_\_

Address \_\_\_\_\_

while he/she used hypnosis in providing Marriage, Family and Child Counseling in a clinical setting at AIRTEL HOTEL, VAN NUYS, CALIF.  
(location of clinic/office)

I supervised the above named applicant from 5-1-87 to 5-3-87  
month/day/year month/day/year

for a total of 0 clock hours in an individual setting and 30

clock hours in a group setting that never exceeded 9 other persons under supervision.

I further certify that the applicant's experience under my supervision demonstrated his/her competence and ability to use hypnosis when performing Marriage, Family and Child Counseling without further supervision.

Date 5-3-87 at VAN NUYS, CALIF.  
City State

Printed Name Eleanor S. Field, Ph.D. Address 5567 Reseda Blvd., Ste. 110  
Tarzana, Ca. 91356

Type of license:  
 Physician  Dentist  Psychologist  Marriage, Family & Child Counselor

License No. PG 7465 State of Issue Ca. Month/Year 1979

If licensed as a MFCC, have you been authorized to use hypnosis under the provisions of Section 1834.6 (Bus. & Prof. Code) for at least six months?  Yes  No

Is the license current?  Yes  No

Eleanor S. Field, Ph.D.  
Signature