



Application for Internship/Practicum

Date:

Student Contact Information

Name:

Street Address:

City, State, Zip:

Daytime Phone:

Home Phone:

E-mail:

Language Fluencies:

Academic Information:

Current School Name:

Degree Program:

Specialty Track:

First Year

2nd Year

Other

Desired Dates of Internship/Practicum: Start Date

End Date

Placement Director Contact Information:

Name:

Phone:

E-mail:

Internship Details:

List degree and licensing requirements of person providing supervision:

Degree/Discipline:

Licensure:

Number of hours you need per semester for this placement. Please be specific.

Total:
Direct contact hours:
Non-contact hours:
Supervision:

For approximately how many hours per week would you be available?

Days/hours available:

Preferences for an assignment (*please check all that apply*):

- Individual Treatment
- Group Treatment
- Couples Treatment
- Children
- Families
- Adolescents
- Adults
- Older Adults
- Assessment and Diagnosis

List interest(s) in other special populations:

Applications for an internship will be considered for all available openings and every consideration given to accommodate a student's interests.

References

Please list 3 references, other than relatives, whom have known you for at least two years. (At least two of your references must be someone with whom you have/have had a professional relationship, such as a supervisor, professor, etc.)

Name	Address	Telephone #	E-mail	Relationship

For more information about our Programs and Services, click on "Services" on our homepage at www.jeffersonmentalhealth.org.

Please e-mail application, along with a letter of interest and a current copy of your resume, to: Mary Jo Starmer, MA, Coordinator of Interns & Volunteers, at www.maryjos@jcmh.org. Questions? Please call 303.432.5124.