



APPLICATION FOR PRACTICUM/ INTERNSHIP TRAINING

Applicant name: _____

Cell phone: _____ Other phone: _____

Email address: _____

Academic program: **C.M.H.C. (M.A.)** _____ **Clinical Psychology (M.S.)** _____

Semester(s) for which you are applying: _____

Anticipated number of **direct hours** needed for your experience (per semester): _____

Previous Practicum/ Internship Experience (if applicable):

Site: _____ Hours: _____

Population: _____ Supervisor: _____

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Population: _____ Supervisor: _____

1. What interests you about our site?
2. What do you believe are your strengths as a counselor-in-training?
3. In which area(s) do you wish to grow through your practicum/ internship experience?
4. Do you anticipate staying with our site for multiple semesters? Do you plan on adding additional sites?
5. How do you feel about working with diverse clients (different ethnic/ religious backgrounds, international students, LGBTQ+, etc.)? Do you have any experiences in this area?



6. What are your goals after graduation?

- Submit the completed application **with resume** to Linda Long, LPC-S, Counselor and Training Supervisor: llong@uttyler.edu
- All accepted interns/practicum students will be required to complete training prior to the beginning of the semester.