



The Family Place Counseling Center Internship Application

Name: _____

Address: _____

Cell Phone: _____

University: _____

Program: _____

Expected Graduation Date: _____

Internship Start Date: _____

Internship End Date: _____

Cumulative Hours Needed: _____

Availability:

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
AM							
PM							

Site preference:
(can choose more than one site)

_____ Central Dallas

_____ South Dallas

_____ Collin County

What are the supervision requirements for your school?

Who is the contact at your school that will supervise your work with The Family Place?

Why would you like to complete your internship at The Family Place?

What do you hope to learn at your internship with The Family Place?

Describe your career goals and how this internship will help you reach those goals.

Are you pursuing employment at the conclusion of your internship?

Please include any additional information that may be relevant when reviewing your application
