

## **Mental Health Counselor Internship Application**

		Α	pplicant Inform	ation		
Full Name:						Date:
	Last	Fi	irst		M.I.	
Preferred Pro	onouns:					
Address:						
, taa1000.	Street Address					Apartment/Unit #
	City				State	ZIP Code
Phone:			Email:			
		YES NO				
Previous leve	el II background check?		Please Specify:			
D	and Badas			la constant		Lab.
Preferred St	art Date: Jar	nuary: <u>(</u> //ea	nr)	June:	(Year)	July:
-		Und	lergraduate Edı	ucation	-	
University:						
•						
Program Director: Email:						
Director's Prefix: Director's Pronouns:						
Bachelor's Degree:						
_			uate/Current Ed	ducation		
Linio conside o						
University:						
Anticipated g	raduation date:					
Program Dire	ector:		Email:			
Director's Pro						
IVIASIEI S/I IIL	Degree:					
		Practio	cum/Relevant E	xperience		
Site Name:						
Population:						

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	Additional Required Documents
	☐ Resume including practicum and related volunteer experience
	☐ Three letters of recommendation 1 from the Program Director stating your Internship eligibility
	1 from another professor
	1 from another mentor/supervisor that is not related to counseling.
	☐ Current college/university transcript
	☐ Copy of research, capstone project, or case study: considered your best work
	Disclaimer and Signature
Applications received	d more than 1 year prior to the start dates will not be considered.
Please email applicat	tions to Amanda Capece LMHC, Clinical Director (she/her) at amanda@blscounseling.net
If selected for an inte	erview, applicants will be contacted via email or a phone call to schedule an interview.
appearance and abid for working in Healt	bunseling internship at Better Living Solutions requires that interns be professional in conduct and the by guidelines set forth by the American Psychological Association, Better Living Solutions, and the CDC heare settings. Mental health counseling students at Better Living Solutions will also be required to follow to forth by the APA for providing patient centered care to our clients. If selected as an intern, I agree to ement.
Signature:	Date:
J	