



**COUNSELOR TRAINING PROGRAM  
INTERNSHIP/PRACTICUM  
APPLICATION**

For Office Use Only	
Date Application Rec'd	_____
Date Deposit Rec'd	_____
Date Return Letter Sent	_____
Date Interview Scheduled	_____
Interview Date	_____
Interviewer(s)	_____
_____	_____
Decision	_____

Completed application, \$25 application fee and all supporting documents must be received before the application will be considered. Internships and practicums are 9 month to one year commitments.

I am applying for:    \_\_\_Internship            \_\_\_Externship            \_\_\_Practicum

**PERSONAL INFORMATION**

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail Address \_\_\_\_\_ Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Present Position \_\_\_\_\_ Date Started \_\_\_\_\_

**BACKGROUND INFORMATION**

A. College Seminary and Graduate Education

Years Attended	School and Location	Degree Earned	Major Field of Study
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

B. Please list your professional affiliations.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

C. Please list your professional certification, licenses, ordination, etc.

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D. Please provide your employment and professional experience. Use an additional page if necessary.

Dates	Employer and Location	Description of Responsibilities
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E. Previous Clinical Pastoral Education?      Yes                  No

If "Yes", please indicate how many quarters and include a copy of final evaluations. \_\_\_\_\_

F. Personal References. List three (3) personal references, one of whom should be a present or former clinical supervisor. Each reference should be provided with the Reference Form found with this application. All forms should be returned to the Pastoral Institute at the address provided.

Reference Name	Address	Relationship
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1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

### **PURPOSE**

Please write a brief Statement of Purpose. Include why you are seeking this opportunity, what you intend to gain from the program, and how you plan to use your training in the future. Should not exceed one typed page.

## PERSONAL REFLECTION

On a separate page, please provide a brief autobiography that addresses each of the following questions.

- A. If you have had personal therapy or other growth experiences, please describe briefly. Explain in what ways you expect it will impact you as an intern.
  
  - B. Briefly describe your current "growing edge" as a person and therapist. Include any significant contributing factors you see.
  
  - C. Describe other factors you think might be of significance in applying for an internship/externship/practicum.
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The Pastoral Institute is a drug-free workplace and your employment is contingent upon successful completion of a drug screen and criminal background check.

- 1. Have you ever been convicted of any violation of law other than a traffic violation?  
 Yes       No      If yes, provide details on an attached sheet.
  
- 2. Have you ever experienced allegations or convictions of sexual harassment or misconduct or any other ethical or criminal charges?  
 Yes       No      If yes, provide details on an attached sheet.

## RELEASE

I have completed this application truthfully to the best of my knowledge. I hereby give permission for the Pastoral Institute to contact by phone or letter those individuals I have listed as references for the purpose of establishing my readiness for residency.

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Signature of Applicant

Date

Thank you for completing the application! Application, supporting documents and a \$25 check made payable to the Pastoral Institute should be sent to:

Pastoral Institute  
Counselor Training Program  
Attn: Administrative Assistant  
2022 Fifteenth Avenue  
Columbus, GA 31901