

## Child Life Practicum Application

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
(Print) Last First MI

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

### Education

Name of institution: \_\_\_\_\_

Present standing: \_\_\_\_\_

Major: \_\_\_\_\_

Practicum supervisor: \_\_\_\_\_ Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

### Applicant's availability

List courses, dates and grades obtained relevant to Child Life (i.e., child development, child psychology, medical ethics, medical terminology, etc.)

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Describe previous experiences working with children (include dates).

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List other work experiences (include dates).

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Briefly describe your career goals.

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To submit your child life practicum application, please submit it via email with your first and last name & semester applying for in the subject line (i.e. Jane Doe Spring 2024 Practicum Application) to **childlife@etch.com** along with the following:

- Cover letter & resume
- 1 letter of recommendation (non-family members who can speak to your work academically and/or professionally)
- Unofficial transcript