

## CPY Internship Application

**All students considering applying for an internship need to obtain faculty approval prior to registering with AAPIC. This form can only be submitted after the successful completion of the dissertation proposal meeting.**

Date: \_\_\_\_\_  
 Student's Name: \_\_\_\_\_  
 Advisor: \_\_\_\_\_

**1. Program Requirements**

- a. Please list any remaining courses and the proposed dates they will be taken:
  
  
  
- b. Please enter the date that the following item was completed, or is expected to be completed (enter date or "N/A" if not applicable):

	Date Completed
Comprehensive Exam	

- c. Is this student in good standing (Yes/No):
- d. Any Incomplete grades (Yes/No):
- e. Is this student on probation (Yes/No):
- f. Are there any complaints filed or currently pending against this student?(Yes/No):

**2. Status of dissertation:**

	Date Completed (or Expected):
Dissertation proposal approved	
Data collected	
Data analyzed	
Dissertation defended	

**3. The above-named applicant has completed the following practicum hours **currently** and as of November (when applications will be submitted for internship):**

	NOW	EXPECTED by November 1st
Total Therapy Hours:		
Total Support Hours:		
Total Additional Experience Hours:		
Total Supervision Hours:		

Signature of Advisor: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Director of Training: \_\_\_\_\_ Date: \_\_\_\_\_