### Northeastern Counseling Internship/Practicum Application

Thank you for considering Northeastern Counseling as part of your training and education experience. The purpose of this application is to identify interested individuals and the placement requirements that are specific to you. This application is for all disciplines and degrees including bachelor, graduate and nursing programs. Upon completion, please email the application to <a href="mailto:info@nccutah.org">info@nccutah.org</a>. We will contact you upon receiving the application and arrange a time to discuss your needs, available opportunities and to answer any questions you may have.

Date of application:					
Name: Mailing Address: Phone: Email:					
Reason for application, please select an option below:   Bachelor Level Placement					
☐ Substance Use Disorder Counselor					
☐ Master Level (eligible to license as a therapist) Practicum/Internship					
☐ Foundation Placement or first year Placement					
☐ Second Year Clinical Placement					
☐ Professional short-term observation experience e.g. nursing, etc.					
Please Explain:					
□ Other:					

#### Academic History and Current Enrollment

Institution	Attended Year	Major/Program	Degree
	То		
	То		
Current:	То		

### **Employment Information:**

Current Employer	Position	Years of Service
Other employment in the past 5 years	Position	Years of Service

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Reference Name	Type of reference	Phone Number
f you have had a previous Placement	: please identify:	
Agency/Location	Na	ame of Supervisor
hrough the State Department of Hun When we contact you, are there any	man services.  concerns that you may need to c	
through the State Department of Hun When we contact you, are there any the background check? ☐ No ☐ Y Are you currently in the Utah State U	man services.  concerns that you may need to c	liscuss with us regarding
Through the State Department of Hundle When we contact you, are there any the background check?   Are you currently in the Utah State Utah fyes, please disregard this section.  Please attach to this application the syour educational program or provide for example, does your program requision,	concerns that you may need to describe man services.  concerns that you may need to describe many needs a link to the specific web page of dire: video or narrative session respecialized training the Northeast	ogram?  placement as dictated by ontaining the information. eview, a specific license or
Please note that all applicants must continued through the State Department of Hunder When we contact you, are there any the background check?   Are you currently in the Utah State Unit yes, please disregard this section.  Please attach to this application the second your educational program or provide For example, does your program requiscipline to provide the supervision, must complete for the placement to Separate file included with this end web page:	concerns that you may need to describe man services.  concerns that you may need to describe many needs to describe man	ogram?  placement as dictated by ontaining the information. eview, a specific license or

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Total numl	per of placemen	t hours requ	iired:				
Which No	rtheastern Cou	nseling Loc	ation are yo	ou applying	for? 🗆 Ro	oosevelt [	] Vernal
Desired st	art and end da	te of placer	ment:				
Proposed	average numbe	er of hours	per week:				
Availability							
	_	Mon	Tue	Wed	Thu	Fri	
	All day						
	8-12						
	12-5						
	After hours						
	comments abo	·	·				
Please, list	three specific thi	ings you're h	oping to lea	rn from a No	ortheastern C	ounseling Pl	acement?
1.							
2.							
3.							
	duation and obt community?	taining licer	nsure as ap	plicable, ho	ow do you p	lan on usin	g your degree to
Please prii	nt or save the c	ompleted a	application	and send it	to info@no	ccutah.org.	