

**Child Life & Creative Arts Therapies Department**

**Art Therapy Practicum Application**

**General information**

**Date:** Click here to enter a date.

**Name:** Click here to enter text. **Pronouns:** Click here to enter text.

**Home address:** Click here to enter text. **Phone:**Click here to enter text.

**Email:**Click here to enter text.

**Academic background**

**College/University:** Click here to enter text.

**Undergraduate or graduate student:** Click here to enter text. **Student status (freshman, sophomore, etc.):** Click here to enter text.

**Minor(s) (if applicable):** Click here to enter text.

**Principal art medium:** Click here to enter text.

**Secondary art medium:** Click here to enter text.

**Previous practicum experience (please copy/paste fields for more experience if applicable)**

**Facility:** Click here to enter text.

**Dates attended:** Click here to enter text. **Population/Ages:** Click here to enter text.

**Responsibilities:** Click here to enter text.

**Total # of hours completed:** Click here to enter text.

**Facility:** Click here to enter text.

**Dates attended:** Click here to enter text. **Population/Ages:** Click here to enter text.

**Responsibilities:** Click here to enter text.

**Total # of hours completed:** Click here to enter text.

**Facility:** Click here to enter text.

**Dates attended:** Click here to enter text. **Population/Ages:** Click here to enter text.

**Responsibilities:** Click here to enter text.

**Total # of hours completed:** Click here to enter text.

**Please answer the following questions:**

1. **Please share your journey in choosing art therapy as a career.**

Click here to enter text.

1. **Why are you interested in a placement at Cohen Children’s Medical Center?**

Click here to enter text.

1. **Describe your understanding of art therapy as it relates to the medical setting.**

Click here to enter text.

1. **Have you had any previous experience in a medical setting?** **If yes, please describe.**

Click here to enter text.

1. **What are some of your strengths in regard to art therapy?**

Click here to enter text.

1. **What do you hope to gain from this experience?**

Click here to enter text.

**Please include with your application:**

* Art portfolio

Due to COVID-19, applicants will be unable to attend interviews on-site. All interviews will take place via Zoom or Microsoft Teams.

If accepted, you must be medically cleared before your start date. The medical clearance includes a completed COVID-19 vaccine, flu vaccine, and PPD test, as well as drug and background testing (which includes a criminal background check).

**Applications are due October 10 of each year.**

Please send completed application packet to:

Shawna Vernisie, MA, LCAT, MT-BC
Creative Arts Therapies Internship Coordinator

CLCATEducationOpportunities@northwell.edu

Please contact the internship coordinator for any questions regarding your application or interview*.*

Thank you,

Dana Moscioni, MA, LCAT, ATR-BC Amanda Goodman, MA, LCAT, ATR-BCArt Therapist Art Therapist, Pediatric Intensive Care
Medical Surgical & Adolescent Medicine& Hematology/Oncology