

**Capital Area Counseling  
Application for Internship**

**Contact Information:**

Name: (last) \_\_\_\_\_ (first) \_\_\_\_\_ (m.i.) \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: (#1) \_\_\_\_\_ (#2) \_\_\_\_\_

E-mail address \_\_\_\_\_

**Relevant Degree Program Information:**

University: \_\_\_\_\_ Degree Program: \_\_\_\_\_

Graduated (Y/N)? \_\_\_\_\_ Month and Year Degree Received OR Expected: \_\_\_\_\_

Additional information or relevant degrees/certifications/licenses: \_\_\_\_\_

**CAC Placement Request Information:**

Applying for Post-graduate Internship or Pre-graduate Internship/Practicum? (list one) \_\_\_\_\_

Proposed Start Date: \_\_\_\_\_ Proposed End Date: \_\_\_\_\_

Number of hours per week: \_\_\_\_\_ Total hours required: \_\_\_\_\_

Additional Information: \_\_\_\_\_  
\_\_\_\_\_

**Please attach your resume AND a (less than one page) personal statement describing your interest in interning at CAC. Include a brief description of your personal philosophy and/or approach to therapy, any experiences that you feel have prepared you to serve our client population, and any special abilities, languages, training, or experience that can help us start to get to know you.**

To submit:

Please email application along with resume and statement to:

**Kate Harris**  
**kate@cacaustin.org**

Revised 10/2017