



Allies for Every Child –Mental Health Program Intern  
Application

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Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Address: \_\_\_\_\_ City \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Additional phone numbers: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_ Fax: \_\_\_\_\_

Are you currently enrolled in an: MFT Program \_\_\_ MSW Program \_\_\_

**Education**

Graduate School: \_\_\_\_\_  
Degree: \_\_\_\_\_ Year completed or anticipated: \_\_\_\_\_  
Graduate School: \_\_\_\_\_  
Degree \_\_\_\_\_ Year completed: \_\_\_\_\_  
Undergraduate School: \_\_\_\_\_  
Degree \_\_\_\_\_ Year completed \_\_\_\_\_

**Professional Experience**

**Internships/Traineeships (include dates, responsibilities, population served):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Related Volunteer/Professional Experience (include dates, responsibilities, population served):** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Languages Spoken** (Note: Only indicate languages other than English in which you are fluent.)



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**Additional Qualification/Expertise** (*Trainings, certifications, etc.*)

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**Note:** Any prior convictions eligible for an approved exemption may take up to 90 days to process from the time of internship acceptance and background check.

**References (do not include personal therapists):**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Statement of Interest**

Completion of the application includes a short "Biographical Statement". Please choose at least one question to address below. You may choose more than one.

- 1) Reason(s) for applying for a traineeship at Allies for Every Child.
- 2) Describe your particular interest in one or more of the following: 1) Early Childhood Mental Health 2) Trauma Informed Care 3) Adverse Childhood Experiences 4) Working with At-Risk Populations
- 3) Describe your interest in one or more of the following: 1) Early Education Services 2) Child Welfare Services (Family Preservation, Prevention and Aftercare, Foster Care and Adoptions).
- 4) Describe the benefits of providing in-home and/or community based mental health services.
- 5) Describe why personal therapy may be beneficial for therapists.

**Additional Information**

Please attach a resume or CV to this application. Complete the application form even if it duplicates information contained in your resume or CV.

**Schedule of Availability**

Please complete the Availability Schedule and return with your packet. Some services will require evening or weekend hours to meet the needs of the individuals and families served by Allies.

**Service Location**



Services are provided primarily in the home, however some services may be provided at Allies' Early Education site: 12120 Wagner St. Culver City, CA 90230, or Administration and Child Welfare Site: 5721 W. Slauson Ave. Culver City, CA 90230

**Expected Time Commitment**

MFT and MSW Trainees/Interns will be expected to make a nine to twelve month commitment to a 16-20 hours per week internship placement at Allies.

**Comments (additional pertinent info about yourself; questions or concerns):**

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**Your signature below indicates that you have answered all of the above questions fully and to the best of your knowledge; that you have read and understand the expected time commitment; and that you grant permission to Allies for Every Child to verify any information provided in this application.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Please return to:** Michelle Schafer, LMFT, Community Wellness Director

Mail: Michelle Schafer  
5721 W. Slauson Ave., suite 200  
Culver City, California 90230

Fax: Attention: Michelle Schafer  
RE: Mental Health Internship  
(310) 846-4112

Email: MSchafer@alliesforeverychild.org



Name: \_\_\_\_\_

Degree Program (MFT or MSW): \_\_\_\_\_

Number of Hours Desired Weekly: \_\_\_\_\_

Number of Hours Desired Total: \_\_\_\_\_

**\* Please mark all time slots in which you are available. Please remember that a minimum of 20 hours is required and some evenings and weekends will be required, based on client availability.**

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
8:00-9:00						
9:00-10:00						
10:00-11:00						
11:00-12:00						
12:00-1:00						
1:00-2:00						
2:00-3:00						
3:00-4:00						
5:00-6:00						
6:00-7:00						
7:00-8:00						
8:00-9:00						