



CLINICAL INTERNSHIP POSITION DESCRIPTION

MAJOR OBJECTIVES:

To prepare students to become skilled, caring and ethical clinicians.

MAJOR RESPONSIBILITIES:

1. To provide therapeutic individual sessions, group sessions, and orientation visits to clients.
2. Maintain proper record keeping for each client.
3. Attend weekly supervision sessions with supervisor, weekly clinical team meetings, and staffing with the intake team
4. Cover one front desk lunch shift a week and as needed.
5. Adhere to the center's policies.

QUALIFICATIONS:

1. Ability to work in a team setting.
2. Ability to work with a variety of clients.
3. Excellent oral and written communication skills.
4. Flexible and non-judgmental.
5. Willing to accept supervision and feedback on job performance.
6. Enrollment in a Master's degree program in a related field.

TRAINING:

1. Completion of internship training provided by SAC.
2. Enrollment in a Masters program focusing in counseling, social work, psychology or a related field.

SHIFT TIMES:

Available times are Monday – Friday, based on SAC scheduling/availability. It is requested that students prioritize being here on Tuesdays from 9-11am for SAC's clinical team meetings. Students must be onsite for a minimum of 16 hours per week.

LENGTH OF COMMITMENT:

Minimum of eight months

Sexual Assault Center is an Equal Opportunity Employer. Sexual Assault Center does not discriminate in regards to sex, race, gender, sexual preference, national origin, disability, age, or marital status in the recruitment, selection, or placement of interns.



CLINICAL INTERNSHIP APPLICATION

Thank you for your interest in interning at The Sexual Assault Center. Please fill out this application and acknowledge the information is true, correct and complete. Please note that students selected for internship will be asked to sign a confidentiality contract as well as complete a background check. All information included in this application is kept in confidence and will not be disclosed to anyone without the student's permission.

Name: _____

E-mail address: _____

Mailing address: _____

City, state, zip: _____

Cell phone: _____ Work phone: _____

Other phone: _____

Which phone number is the best to reach you? Cell Work Other

Preferred method of contact: E-mail Phone

Date of birth: _____ Pronouns: _____

Fully proficient languages (other than English): _____

Education:

College: _____

Major/Degree/Graduation Date: _____

College: _____

Major/Degree/Graduation Date: _____

Post-Graduate: _____

What is your availability for internship? (check all that apply)

Monday Tuesday* Wednesday Thursday Friday

*Please note that Tuesdays from 9-11am are Clinical Team Meetings. It is expected that interns attend unless otherwise approved. Interns are expected to be onsite a minimum of 16 hours

Community Involvement

Clubs, organizations, and/or groups you are involved in:

Name: _____ Role: _____

Name: _____ Role: _____

Volunteer Experience:

Agency name: _____ Dates involved: _____

Role: _____

Agency name: _____ Dates Involved: _____

Role: _____

Agency name: _____ Dates Involved: _____

Role: _____

Other hobbies/special skills:

Briefly state why you are interested in becoming an intern at SAC:

How did you hear of SAC?

Do you feel you have any personal experiences, issues or attitudes, which would impact your effectiveness in dealing with survivors of sexual assault or child sexual abuse?

List three skills or qualities that you have to offer that will be beneficial in your work at SAC.

List three things you hope to gain from your work as a SAC intern.

Please list an area of growth (something you are aware of that needs improvement) that you would like to address.

What therapeutic models are you interested in?

Have you previously seen, or are you presently seeing, someone for personal counseling? If yes, was/is the experience helpful?

Have you ever been charged or convicted of any felonies or ethical violations? If yes, please provide a brief explanation.

Have you ever been reported for suspected child abuse? If yes, please provide a brief explanation.

Is there anything else you want us to know about you prior to your interview?

STATEMENT OF ACCURACY AND AUTHORIZATION:

This form has been completed to the best of my ability, and I believe all answers to be true and factual. At the same time, I give you my authorization to conduct a criminal background check.

Date: _____ **Signature:** _____

Please return application (email preferred), along with a cover letter and resume, to:

Ashley Moore, LMFT Clinical Therapist and Internship Coordinator

Sexual Assault Center

101 French Landing Drive, Nashville, TN 37228

(615) 258-5875

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