

Monroe Carell Jr. Children's Hospital at Vanderbilt
Practicum Application

Full name

Email

Phone Number

Are you affiliated with an academic institution? (Yes, no)

Please provide the name and contact information for your academic program coordinator.

What is your degree status (in progress, completed)

Please list your top relevant experiences for child life practicum readiness. You may list up to 3 experiences.

Experience 1

Setting

Description of setting

Role

of hours completed as of submission

Description of role/responsibilities

Start date

End date

Experience 2

Setting

Description of setting

Role

of hours completed as of submission

Description of role/responsibilities

Start date

End date

Experience 3

Setting

Description of setting

Role

of hours completed as of submission

Description of role/responsibilities

Start date

End date

Select an experience you listed on your application that demonstrates your work with children. Provide a specific example of how this experience prepared you for a child life practicum (200 word limit)

Describe a situation that prompted you to self-reflect on your personal views and experiences related to diversity, equity, and inclusion and how that translates to the work of a child life specialist (200 word limit)

Is there anything else you would like to share with the reviewers? (150 word limit)

I attest that the information in this application is true and accurate

Applicant signature:

Date: