



Application for INTERNSHIP

Name: _____

Address: _____

Zip: _____ State: _____ Country: _____

Telephone: _____ e-mail: _____

I wish to apply for the following INTERNSHIP:

- Speech and Language Therapy Internship**
- Behavior and Data Internship**
- Special Education Internship**

I understand the Internship is an unpaid, voluntary Internship

Signed: _____

I understand the Internship can be terminated at any time if I act inappropriately and/or disrupt the TP program, disrespect staff and/or students and betray any confidential information.

Signed _____

Please provide a 1-page letter explaining why you want the internship and why you feel you are the best candidate for an internship.

Please include in your application the following:

- Letter of recommendation from a current faculty member at your University
- Proof that you attend the University (either a letter of acceptance and/or letter from the department)
- Letter of reference from a previous employment, member of the community (can be a friend, business leader and/or previous employee or local organization)

Please note Turning Pointe takes no responsibility for any accidents, work related injuries and/or property you bring to Turning Pointe. Please sign and acknowledge that your participation as an Intern at Turning Pointe is at your own risk.

Signed: _____