

# Internship Checklist

- \_\_\_ I understand that this entire application must be completed
- \_\_\_ Thoroughly read the information on the Psychology Department webpage related to the Practicum experience.
- \_\_\_ Discuss any concerns with Dr. OHL O ([@iup.edu](mailto:ohl@iup.edu)).
- \_\_\_ Prepare application materials as listed below (pages 3-5 of this file, plus resume).

The three-page application form, including a statement of internship objectives and a list of relevant coursework.

Your resume sample is included in this application package

- \_\_\_ Submit complete application package to Dr. OHL O (by email). Dr. OHL O will contact you from among the following interviewers and contact them for an appointment.

Dr. Bill Farrell	<a href="mailto:william.farrell2@iup.edu">william.farrell2@iup.edu</a>	(202 Uhler)
Dr. OHL O	<a href="mailto:ppfjrzdq#lxs@iup.edu">ppfjrzdq#lxs@iup.edu</a>	( 8 KDHU)
Dr. Mark Palumbo	<a href="mailto:mark.palumbo@iup.edu">mark.palumbo@iup.edu</a>	( Uhler)

6 KDURXBRPSODISVSHLFSDFINRDLWRXD F D G H I J K L M N O P Q R X U  
3 U D F W & R X P P L W L Q M H U S L H Z H R X U Q W H U If you are unable to  
keep your interview appointments with the \ R X U L Q W H please be sure to  
contact them prior to the appointment.

Once you have completed \ R X U interviews, Dr. OHL O will contact you to let you know if you have been approved by the Practicum Committee.

- \_\_\_ Applicants should make appointments for interviews with that you are approved. When you contact say V R P H W K L Q J - OHL O I am a student in the Psychology department at IUP, and I am interested in doing an internship at your site for the ---- V H P H V W H U See below for issues to discuss during the site interview.

Interview with your preferred sites. Ideally this should occur in 6 H S W H P E H U October IRU 6 S U L Q J - D Q X D U \ ) H E U X D U \ IRU 6 X P P H U D Q G O D U F K \$ S U L O I

- \_\_\_ If your site is a new site, it will need to be approved by the committee

\_\_\_\_\_ Complete all additional forms required by your site. Consider the following possibilities:

1. PA state police criminal clearance (D Q G R U )% , F U L P L Q D O E D F N J U R X Q G
2. P \$ child abuse clearance
3. Whether you need to take out professional liability insurance. THIS IS EXTREMELY IMPORTANT. YOU CANNOT DO A PRACTICUM WITHOUT INSURANCE. If the site does not carry insurance, I will tell you how to get it through the American Psychological Association.
4. Whether a contract between the site and IUP is required.

\_\_\_\_\_ Notify Dr. O H W O when you have been accepted by a site.

\_\_\_\_\_ \$ I W H U R P S O H W Q Q H F H V D O H D U D D Q E S V S U F K R M H O L D E I L Q W X U D Q F  
 ' U 0 H L O L O V C H Q G R X D Q G G L W & R O D O R J H + H D O W G + X P D G S H U Y L F H V  
 & + + 6 D S S O L F D R W L F W C F R P S O H S W M H U + + 6 K D V D S S U R Y R X G U V L W H Q G  
 Y H U L I L R X G K D Y H F R P S O H W K I D E R Y U H T X L U H P R O Z W O E C H J L Y H e Q r d n i c  
 permission to register for PSYC 493

\_\_\_\_\_

:LOOLDP00HLQPh.D. Psychology Department Practicum Coordinator

### Undergraduate Internship (Practicum) Application

3OHDVHLEOXGHDFRPSOHWHGYHUVLRQWKLWIRUP S QdktW Along with your resume, brief statement of objectives, and a list of completed courses relevant to the internship.

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Check off the following practicum prerequisites:

- 1.  Will you have junior (60 hours) or senior standing at the time of your internship?
- 2.  Will you have taken at least 12 credits of psychology courses at the time of your internship?
- 3.  Do you have an overall GPA of at least 2.0?

Banner ID: @ \_\_\_\_\_

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

Home Address \_\_\_\_\_

Street

City

State

Zip

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

Street

City

State

Zip

IUP Email address: \_\_\_\_\_

Home Phone \_\_\_\_\_

Current Phone \_\_\_\_\_

Major: \_\_\_\_\_

Minor: \_\_\_\_\_

Anticipated

## STATEMENT OF INTERNSHIP OBJECTIVES

Describe what you expect to accomplish by completing an internship in psychology. Consider *objectives that are unique to you* as well as those that may be applicable to the majority of students.

~~7DONDERXWWKHVNLOOVRXZVKWRDFTXLUHRUIXUWKHUGHYHORSDVBO  
DVWKHWSHRIVLWHVRXEXOGEHLQHUHVWHGLDQZ~~

List potential sites in order of preference (to be completed after meeting with Dr. OHLO)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Relevant Coursework

List your psychology courses, and any other courses that might be relevant to your practicum experience.

Revised



**Special note concerning ethics:**

an IUP student, I realize that it is my responsibility to cooperate with my employer and to hold in professional confidence any information gained regarding the business of the firm, institution or agency, and to refrain from using such information in an unethical manner. It is my further responsibility to maintain

**REGISTERING FOR PSYC 493: PSYCHOLOGY PRACTICUM**

Students are given permission electronically to enroll for specific sections of PSYC: 493. When more than a 3-credit practicum is desired, it is necessary to enroll for two sections of the same course (strange but true!). **You are given permission to enroll for specific sections and if there is a change in the number of credits that you desire, it is necessary to notify the department practicum coordinator before you can enroll.**

**ALL STUDENTS WILL ENROLL FOR PSYC 493, SECTION 003 (3 CREDITS).**

Students desiring a 6-credit practicum will enroll also for Section 006 (3 credits).  
Students desiring a 9-credit practicum will enroll also for Section 009 (6 credits).  
Students desiring a 12-credit practicum will enroll also for Section 012 (9 credits).

Summary:

3 credits	Section 03
6 credits	Section 03 + Section 06
9 credits	Section 03 + Section 09
12 credits	Section 03 + Section 12

Some students may be interning at a site **and** residing more than twenty-five miles away from the main campus. They may apply to be exempted from paying any activity fee **when the internship is the only course** for which the student is enrolled. The activity fee waiver form is available on-line. The health fee waiver form can be obtained in Accounts Receivable, Clark Hall.