

Application for Summer Internship

Please return completed application, two letters of recommendation, cover letter, and an academic transcript to:

Dr. James Slavet
Judge Baker Children's Center
53 Parker Hill Ave
Boston, MA 02120

Please mark an X next to the position for which you are applying. If you are applying for more than one position, please indicate your first preference with a 1 and your second preference with a 2.

Undergraduate Counselor _____
Special Education Aide _____

Please list your current address and phone number:

Name: _____
Address: _____
Phone: _____
E-Mail: _____

If you will be leaving your current address and living at a different address before June 1, please list that address and phone number below:

Address: _____
Phone: _____
Date of move: _____

Please list your permanent address and phone number (if different from current address):

Address: _____
Phone: _____

EDUCATIONAL BACKGROUND

	School/College/ University	From/To:	Degree	GPA	Major
High School					
Undergraduate					
Graduate School (if applicable)					

PREVIOUS JOB EXPERIENCE

Employer: _____ From/To: _____
Address: _____
Supervisor's Name: _____ Phone #: _____
Job Description: _____

Reason for Leaving: _____

Employer: _____ From/To: _____
Address: _____
Supervisor's Name: _____ Phone #: _____
Job Description: _____

Reason for Leaving: _____

ADDITIONAL INFORMATION

List all undergraduate psychology, education, computer science, statistics, and any other relevant courses you have taken and the grade received in each. Please include all relevant classes in which you are currently enrolled. Continue on the back of this page if necessary:

Briefly describe any additional work experience you have had with children, other than that listed above.

Briefly describe any additional research experience you have had, other than that listed above.

List any publications, reports, or special projects on which you have worked.

Please mark the line that best describes your experience with the following sports:

	Don't Know At All	Play Recreationally	Know Rules and Fundamentals	Play on a Team	Coaching Experience
Basketball	_____	_____	_____	_____	_____
Soccer	_____	_____	_____	_____	_____
Softball	_____	_____	_____	_____	_____

Are you currently certified in First Aid, CPR, Lifeguarding, or Water Safety and Instruction? _____

Age of children with whom you are interested in working: (Age Range 5 - 12) _____

Please write the name, title, and complete address of the person who referred you to this program:

Please list the names, titles, addresses, and phone numbers of the people who will be writing letters of recommendation for you:
