Dear Prospective intern,

Thank you for your interest in interning with the Children's Advocacy Center Serving Bastrop, Lee and Fayette. Interns provide the vital support needed for the Center’s successful operation and we offer a variety of opportunities.

By filling out the attached intern application, you are one step closer to becoming part of a supportive process for young victims of abuse.

Here are a couple of requirements to consider about our programs when applying:

**Therapy Internship**

1. We require a 2-semester commitment.

2. We require all intern to participate in at least one of our evening groups scheduled on Monday and Thursday.

**Family Advocate Internship**

1. We require a minimum of 12 hours weekly to be completed in shifts. Shifts are 8:30 am to 1:00 pm, 12:30 pm-5:00 pm or a full day.

2. We require all intern to participate in at least one of our evening groups scheduled on Monday and Thursday.

*Summer interns are required to participate in our family camp.

Please feel free to reach out for program specific requirements, as we strive to remain flexible to our student’s needs.

When filling out the application please remember to print clearly, answer all questions and complete all pages, as incomplete applications will not be reviewed. Once complete, please email your application and a copy of your resume to sarah.moreno@cacbastrop.org.

After completing and submitting your intern application, the following steps will need to be taken before you are matched with a position:

1. Complete intern application

2. Have two individuals complete and submit a Internship Program Applicant Reference Evaluation Form on your behalf to the mentioned email.

3. Schedule interview.


5. Attend our required CAC 101 training and other program specific training.

If you have any questions or would like additional information, please contact me by phone at 512-321-6161 ext. 212 or by email at sarah.moreno@cacbastrop.org.

Again, thank you for your support. We hope to see you around the Center soon!
Name: ____________________________________________

Address: ____________________________________________ Zip code ____________________________

Home Phone: ________________________________ Cell Phone: ________________________________

School Attending: ________________________________

Current Academic Level/ Expected Graduation Date: ________________________________

Major: ________________________________ Minor: ________________________________

What CAC internship are you applying for:

____________________________________________________________________________________

____________________________________________________________________________________

What therapeutic Modality do you base your theoretical framework from?

____________________________________________________________________________________

____________________________________________________________________________________

Please list your expectations from an internship position with the Center:

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

Please Indicate when you are available:

<table>
<thead>
<tr>
<th></th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
</tr>
</thead>
<tbody>
<tr>
<td>(8:30-12:30) AM</td>
<td></td>
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<tr>
<td>(12:30-5:00) PM</td>
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<tr>
<td>Evening Group</td>
<td></td>
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</table>

How did you learn about our volunteer program?

Class Presentation Professor:  Flyer

Volunteer Fair Volunteer Center Internet site
Friend/Volunteer

Other Languages (Please note the level of knowledge such as Beginners, conversational (moderate) or fluent)

<table>
<thead>
<tr>
<th>Language</th>
<th>Speak</th>
<th>Writing</th>
<th>Reading</th>
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</table>

Are you volunteering as a class credit? Yes No
Name of Class/Instructor?

Are you currently employed? Yes No
Current Place of Employment

Do you have experience with children? List ages and Types of activities:

In what capacity have you worked with children? Please Explain

Do you have any experience with: (please explain)?

<table>
<thead>
<tr>
<th>Child Abuse?</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foster Case?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Child Welfare?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Criminal, Juvenile, or Family Court System?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Other Child Service Agencies?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Diverse Populations?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Do you have a Police record?</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

If yes, please explain

Do you have any current issues related to drugs, alcohol, stress or mental health that may pose a risk for you and/or the families we serve? Yes No
WORKING WITH TRAUMA

Work with Children can be active and stressful. Child abuse and child sexual abuse, in particular, often causes stress and emotional turmoil for professionals, interns and volunteers.

Are there reasons and/or history that may cause interning to be particularly stressful or harmful to you?

Yes  No  If yes, please explain

Do you have any limitations that may pose a risk for you or a center client that may need accommodations by the CAC?  Yes,  No  If “Yes, please explain

Please describe any previous experience, particularly in working with children and families.

Present memberships in clubs or organizations, including any office or responsibility:

What would you like to gain from the Internship experience?

What do you feel are your strengths and opportunities for growth?

What is your interest, community activities, and hobbies?
List any special skills that you feel might be an asset to the CAC.

__________________________________________________________________________

__________________________________________________________________________

Have you ever been prohibited, reassigned, or asked to leave any position, whether as a volunteer, employee or intern with an organization or agency involving contact with children? Yes, No
If yes, please explain (including organization and date):
__________________________________________________________________________
CIVIL/ CRIMINAL OFFENSE INFORMATION

The Children’s Advocacy Center serving Bastrop, Lee, Fayette works in conjunction with law enforcement and state and county agencies involved in the criminal justice system process.

I have       have not       been convicted of a felony or a misdemeanor.

If you answer is affirmative, give details, including date, place, nature or conviction, and disposition.

I have       have not       been charged with a felony or misdemeanor.

If you answer affirmative, give details, including date, place, and type of charges.

I have       have not       pled to a lesser offense.

If you answer is affirmative, give details, including date, place, and type of charges.

I have       have not       currently under indictment or charged in an official criminal complaint accepted by a district or county attorney with a felony or misdemeanor.

If you answer is affirmative, please give details, including the type of charge.

I have       have not       ever been prohibited from serving in capacity as an employee or volunteer with any organization or agency working with children.

If you answer is affirmative, please give details, including the date, address and phone number of the organization.

I have       have not       ever been assigned, removed, or asked to leave any position involving contact with children. If the answer is affirmative, please give details, including date, name, address and phone number of the organization.

I have read this form in its entirety and understand that the information may be verified by the Children’s Advocacy Center Serving Bastrop, Lee and Fayette and that the inclusion and/or admission of any false information or the omission of any requested information is cause for my immediate dismissal from placement with this agency. I agree to inform the Children’s Advocacy Center if the information changes any time during my participation at the Children’s Advocacy Center.
CHILDREN’S ADVOCACY CENTER SERVING BASTROP, LEE, AND FAYETTE BACKGROUND CHECKS

- The Children’s Advocacy center serving Bastrop, Lee and Fayette will complete records checks with all available resources including, but not limited to, the Austin Police Department, the Department of Public Safety, Travis County Sheriff’s Department, and the Texas Health and Human Services on all potential staff and volunteers. Background checks utilize state and nationwide records, reviewing criminal, sex offender, and child abuse history. It is the mission and responsibility of the Children’s Advocacy Center serving Bastrop, Lee and Fayette to help victims of child abuse and their families recover from the abuse. Because of the nature of the injuries sustained by the children and families that come to the Center for help, the Center reserves the right to decline any applicant based upon the results of the records checks and/or interviews with Center personnel.

- The Center does not accept applicants that have investigations, prior charges, convictions, or pending charges for felony or misdemeanor acts involving sexual offenses, violence, child abuse/neglect, crimes against persons, or other acts that may pose a risk to children. It is extremely important that you disclose any offense so that we can make good decisions for our clients. Issues and prior citations sometimes appear in your records even though you may believe the issues and/or violations to be resolved.

- Investigation into background is not limited to convictions.

- Omission of all civil or criminal involvement is cause for immediate dismissal from employment, volunteer, or academic placement with this agency.

- The Center may review all previous, current, and subsequent information related to my application and may unconditionally accept or reject my application for services.

- The Center does re-screening of background checks every three years.

- Interns must contact their supervisor immediately if they become involved in any criminal or civil court proceeding (i.e., custody, arrests, child abuse allegations, etc.) during their placement.

- Employees must contact their supervisor immediately if they become involved in any criminal or civil court proceeding (i.e., custody, arrests, child abuse allegations, etc.) during their placement. I have read and understand these policies.

Signature: ___________________________ Date: ____________

REFERENCES

I UNDERSTAND THAT THE CHILDREN’S ADVOCACY CENTER SERVING BASTROP, LEE AND FAYETTE WILL VERIFY AND CAN AT ANY POINT CONTACT MY REFERENCES TO OBTAIN INFORMATION REGARDING MY SUITABILITY TO WORK WITH CHILDREN AND FAMILIES. ALL OF THE INFORMATION ON THIS APPLICATION IS ACCURATE TO THE BEST OF MY KNOWLEDGE. I AGREE TO TAKE ANY REQUISITE ORIENTATION OR TRAINING NECESSARY FOR THE VOLUNTEER POSITION(S) THAT I HIGHLIGHTED ON MY APPLICATION. I UNDERSTAND THAT CRIMINAL HISTORY RECORDS INFORMATION AND A TEXAS DEPARTMENT OF PROTECTIVE AND REGULATORY SERVICES CENTRAL REGISTRY CHECK WILL BE COMPLETED. I UNDERSTAND THAT I WILL BE UNABLE TO VOLUNTEER INTERN UNTIL THE CHECK HAS BEEN COMPLETED.
Internship Program Applicant Reference Evaluation form

Name of Applicant: ________________________________________________________________

The above named person has applied to the internship program at the Children’s Advocacy Center serving Bastrop, Lee and Fayette counties and has asked that you supply the information requested below.

1. Your personal knowledge of the applicant:
   I have _____ Served as the Applicant’s Professor
   _____ Supervised the applicant as an Employee
   _____ Worked with the applicant as a Colleague
   _____ Known the Applicant only as a friend
   _____ Other (Please specify): ________________________________

2. Academic Potential
   - Ability in written Expression
   - Ability in Oral Expression
   - Overall Intellectual Capacity
   - Initiative
   - Perseverance
   - Conscientiousness

3. Professional Potential
   - Professional Competence
   - Professional Attitude
   - Professional Appearance
   - Adherence to ethical behavior

4. Social skills Potential
   - Commitment to other’s Welfare
   - Understanding of other’s verbal & nonverbal communication
   - Respect for others’ individually/uniqueness
   - Respect for other’s freedom of choice
   - Belief in others’ positive potential
   - Self-awareness
   - Appropriate self-control
<table>
<thead>
<tr>
<th>Social Skills Potential (cont.)</th>
<th>Excellent</th>
<th>Good</th>
<th>Fair</th>
<th>Unknown</th>
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<tbody>
<tr>
<td>Integrity</td>
<td></td>
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<tr>
<td>Understands Others’ perceptions &amp; Actions</td>
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<tr>
<td>Interpersonal genuineness</td>
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<tr>
<td>Promotes own Physical and mental health</td>
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<tr>
<td>High stress/frustration tolerance</td>
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<tr>
<td>Works collaboratively with others</td>
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<tr>
<td>Adaptability</td>
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<tr>
<td>Commitment to self-improvement</td>
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<tr>
<td>Enthusiasm</td>
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<td>Appropriate self-confidence</td>
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<td>Openness to constructive feedback</td>
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5. This applicant is fluent in (check all that apply):
   - [ ] English
   - [ ] A language other than English (please indicate) ____________________________

6. In terms of professional potential, I would rate the applicant as:
   - [ ] An outstanding candidate for an internship program
   - [ ] A good prospect for an internship program
   - [ ] An average prospect for an internship program
   - [ ] A weak prospect for an internship program

7. Clarification (optional) _______________________________________________________
   ______________________________________________________

__________________________  _________________________
Signature                    Date

Name typed or printed: ____________________________
Address: _________________________________________
Position or title: ________________________________

Please scan and email the filled form to the CAC at sarah.moreno@cachastrop.org with the applicant’s first and last name in the subject line.