

**MASTER'S TRAINING PROGRAM APPLICATION**

**2022-2023**

**APPLICATION PROCEDURES**

1. Forward the completed application form (see below) and a current CV to us in electronic format. Please submit all forms in PDF format to ccolbert@wcu.edu . **Applications should be submitted by 5:00 PM EST on Friday, March 4, 2022.**
2. Arrange to have two (2) completed *WCU CAPS Master’s Training Program Reference Forms* (see separate document) e-mailed to ccolbert@wcu.edu **by 5:00 PM EST on Friday, March 4, 2022.** *Reference writers must complete the provided WCU CAPS reference forms* (not a standard letter of recommendation).
3. Applicants selected for interviews will be contacted by **Monday, March 11, 2022.** If you are selected for an interview, additional details regarding the interview process will be given to you at that time. Interviews will be held **Thursday, March 17, 2022**.

**Please direct inquiries and/or applications and recommendation forms to:**

Calista Colbert, LCMHC-A

Master’s Training Coordinator

ccolbert@wcu.edu

WCU Counseling & Psychological Services

225 Bird Building

Cullowhee, NC 28723

828.227.7469

Thank you for your interest. We look forward to considering your application!

 **APPLICATION FOR 2022-2023 MASTER'S TRAINING PROGRAM**

 **WCU Counseling & Psychological Services (CAPS)**

Name of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name you go by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Pronouns: \_\_­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

 **Street City State Zip Code**

Phone: (\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_ Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Summer Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Street City State Zip Code**

Summer Contact Phone: (\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_ Summer Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(many grad assistant accounts get deactivated over the summer, so please provide us with an email address you can access over the summer)*

Do you have approval from your academic department to apply for this practicum/internship/field placement?

Yes\_\_\_ No\_\_\_

Relevant Master’s Level Courses Completed (including courses enrolled in this semester) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Relevant Clinical or Volunteer Background and/or Experience (Please include a pdf copy of your cv with this application.)

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Please describe your reasons for applying specifically to our site. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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What are your goals for your training experience at CAPS?

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Please list the names of two references. **Please have the persons listed send reference forms via email to CAPS at address below. Reference writers must complete the provided WCU CAPS reference forms (not a standard letter of recommendation).**

 1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Applicant's Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Please save file in PDF format and return to Calista Colbert, Master’s Training Coordinator, (******ccolbert@wcu.edu******).***