THE CHILDREN'S HOSPITAL OF PHILADELPHIA CHILD LIFE, EDUCATION and CREATIVE ARTS THERAPY DEPARTMENT

## Dear Applicant,

Thank you for your interest in our creative arts therapy practicum program. Three times a year we offer exposure to the creative arts through training in the Child Life, Education and Creative Arts Therapy Department. This training is intended to introduce individuals to the creative arts therapy field, as well as the variety of experiences facing children and adolescents in a healthcare setting. A specific Board-Certified Art Therapist or Board-Certified Music Therapist will supervise the student as they participate in observing and processing creative arts therapy sessions.

The training takes place in the hospital setting and in an environment where children will be sick and in pain, while other children may be full of energy. It is important to think about your personal responses to learning in this type of environment which can sometimes be over-stimulating for individuals. Some students determine that this is not the most suitable training environment for them.

Practicum students must have completed core curriculum and must have demonstrated successful experiences with children. For art therapy practicum candidates, the core curriculum includes a minimum of 4 university courses in studio arts and a minimum of 4 university courses in psychology, including developmental psychology and abnormal psychology. For music therapy practicum candidates, students must be enrolled in a music therapy degree program. This type of training is highly recommended for those students who are considering a career as an art or music therapist.

Practicum students must complete established number of weekly scheduled hours (typically 8-12 hours per week) for a period of approximately 14 weeks. Application submission deadlines are as follows:

For placement session: Application postmarked by:

Summer session: Begins MayApplication postmark deadline: January 1Fall session: Begins AugustApplication postmark deadline: April 1Spring session: Begins JanuaryApplication postmark deadline: September 1

#### The application deadline is a postmarked deadline.

Application is not a guarantee of acceptance. Due to the expectation that we provide students with quality supervision and education during placement, a limited number of students are accepted per semester. We will be evaluating all applications for the designated semester after the application deadline date. Should you have any further questions please call the Child Life, Education and Creative Arts Therapy Department at 215-590-2001.

Sincerely,

Child Life, Education & Creative Arts Therapy Department

THE CHILDREN'S HOSPITAL OF PHILADELPHIA CHILD LIFE, EDUCATION, and CREATIVE ARTS THERAPY DEPARTMENT CREATIVE ARTS THERAPY PROGRAM PRACTICUM APPLICATION

Please indicate which progra	m and semester (month/yea	ar) you are applying for:
Art Therapy	Music Therapy	
Personal Information:		
Name:		_
Phone Number:		
Email Address:		
Current Address:		
Permanent Address:		
Emergency Contact Person: _		Phone:
Major:	Gradu	uation Date:
Phone Number:		
Internship Experience Require courses, etc.):	ements from University (i.e.,	Total hours required, full-time/p
Name of Institution:		
Major:	Gradu	uation Date:
University Contact & Title:		
Phone Number:		

# Relevant Experience: (Include any setting with most recent experience listed first)

1. Name of Institution and Location
Supervisor & Title:
Phone:
Dates: to
Total Hours:
Description of experience
2. Name of Institution and Location
Supervisor & Title:
Phone:
Dates: to
Total Hours:
Description of experience
3. Name of Institution and Location
Supervisor & Title:
Phone:
Dates: to
Total Hours:
Description of experience

(Continue on back of page if necessary)

### **Application requirements:**

In order to be considered for a practicum placement, please submit:

- 1. Completed application
- 2. A current resume
- 3. 4 personal/professional goals for your practicum experience at The Children's Hospital of Philadelphia
- 4. A letter of intent of regarding your next academic and professional steps for your career path
- 5. An essay describing your personal relationship with creative arts discipline (art or music)
- 6. A copy of academic transcripts from current institutions
- 7. Letter of professional recommendation from academic advisor/course instructor that includes practicum course requirements and expectations from the university

Please submit all completed application packets by the stated application postmark deadline for the particular session you are interested in.

### Application packets can be emailed to <a href="mailedto:royanoa@chop.edu">troyanoa@chop.edu</a> or mailed to:

Child Life, Education, and Creative Arts Therapy Department 3501 Civic Center Blvd Child Life – Colket Bldg, Suite 1100 Attn: Creative Arts Therapy Student Program

Philadelphia, PA 19104