



**The Children's Hospital of Philadelphia**  
**Child and Adolescent Psychiatry and Behavioral Sciences**  
**Email: ([psychologyexternship@chop.edu](mailto:psychologyexternship@chop.edu))**

Last: \_\_\_\_\_ First: \_\_\_\_\_ M.I. \_\_\_\_\_

Email Address: \_\_\_\_\_

**Training Interests and Time Commitment**

Training Interest (list the practicum programs you are applying to. Please no more than 6):

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Time commitment you are looking for:

1 day/week (8 hours)

2 days/week (16 hours)

I am flexible

if flexible- what range are you looking for?

Other amount of time/week

Does your program REQUIRE you to do a certain number of hours/week at the same location (even if you are doing more than one rotation)? Yes          No

If yes, please tell us how many hours you are required to do:

Note: we have several rotations listed in the externship grid (and online) that are less than 16 hours/week. We will work with students to combine multiple rotations to meet their hour requirements. Please talk with potential supervisors/interviewers about this if it applies to you.