

**Child Life Practicum Application**

**Application for Session: Summer**

**Application deadline is January 27th**

**PERSONAL INFORMATION**

Last Name:	First Name:	MI:
Current Phone:	Permanent Phone:	
Email Address:		
Current Address:	City/state/zip:	
Permanent Address:	City/state/zip:	
Preferred pronouns:		

**EMERGENCY CONTACT**

In case of emergency contact:		
Name:	Relationship:	
Address:		
Home Phone:	Cell Phone:	Work Phone:

**APPLICATION CATEGORY**

<p><input type="checkbox"/> <b><u>UNIVERSITY AFFILIATED</u></b>                  (Will be a matriculated student during practicum and hours will count toward university credit)</p> <p><b>Name of College/University:</b></p>	<p><input type="checkbox"/> <b><u>INDEPENDENT</u></b>                  (Student will not be enrolled in a university at the time of the practicum, or hours will not count toward university credit.)</p>
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**ACADEMIC INFORMATION**

Please list all colleges and universities attended, ***beginning with the most recent.***

1. College/University Name:

City/State:

Dates attended: From:  
To:

Graduation (or anticipated):

Degree earned:

Major:

2. College/University Name:

City/State:

Dates Attended: From:  
To:

Graduation (or anticipated):

Degree earned:

Major:

3. College/University Name:

City/State:

Dates Attended: From:  
To:

Graduation (or anticipated):

Degree earned:

Major:

4. College/University Name:

City/State:

Dates Attended: From:  
To:

Graduation (or anticipated):

Degree earned:

Major:

*Please attach additional pages if necessary.*

### Experience Working or Volunteering with Children

Institution:	Position Title:	
Supervisor Name:	Supervisor's Title:	
Supervisor's Phone:	May We Contact Supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Dates Worked: From: To:	Hours/Week:	Total Hours Completed:

In 3-4 sentences describe population and responsibilities:

Institution:	Position Title:	
Supervisor Name:	Supervisor's Title:	
Supervisor's Phone:	May We Contact Supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Dates Worked: From: To:	Hours/Week:	Total Hours Completed:

In 3-4 sentences describe population and responsibilities:

Institution:	Position Title:	
Supervisor Name:	Supervisor's Title:	
Supervisor's Phone:	May We Contact Supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Dates Worked: From: To:	Hours/Week:	Total Hours Completed:

In 3-4 sentences describe population and responsibilities:

Institution:	Position Title: <a href="#">Click here to enter text.</a>	
Supervisor Name:	Supervisor's Title: <a href="#">Click here to enter text.</a>	
Supervisor's Phone:	May We Contact Supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Dates Worked: From: To:	Hours/Week:	Total Hours Completed:

In 3-4 sentences describe population and responsibilities:

Institution:	Position Title:	
Supervisor Name:	Supervisor's Title:	
Supervisor's Phone:	May We Contact Supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Dates Worked: From: To:	Hours/Week:	Total Hours Completed:

In 3-4 sentences describe population and responsibilities:

Institution:	Position Title:	
Supervisor Name:	Supervisor's Title:	
Supervisor's Phone:	May We Contact Supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Dates Worked: From: To:	Hours/Week:	Total Hours Completed:

In 3-4 sentences describe population and responsibilities:

*Please attach additional pages if necessary*

## Essay Questions

Please answer the following questions. (*approx. 200 words each*)

1. As a student, what strengths will you contribute to the UC Davis Child Life Practicum Program?
2. Please provide an example of a creative activity or program that you planned and facilitated with a child or a group of children - what was the goal of the activity and how did it benefit the children?
3. Reflect on a time when you engaged with a child or family from a diverse background.  
How might this experience affect your approach to working with children and families in a hospital setting?
4. What are you hoping to gain from a child life practicum?

## Minimum Qualifications for Practicum Student Candidates

**The UC Davis Child Life Program will consider applicants for a practicum who meet the following criteria:**

Submit a completed, typed application on time, with all required supplemental materials

Completed a minimum of 100 hours experience working with well/typically developing children in group or individual settings

Completed 50 volunteer hours in a pediatric healthcare setting (preferably under CCLS supervision)

Have completed at least one class in typical child development with a passing grade

Can commit to a 108-hour practicum – schedule may vary

### **Recommended:**

An educational background in child life, child development or human development, family systems, or education

## Availability

If you were to be selected for a practicum experience, we are interested in learning about your availability. Depending on the units assigned there will be a variety of options for creating the practicum student's schedule. Please note your schedule interest/availability below. If you are selected for the practicum experience, we will try to do our best to accommodate your needs. Please note weekends and evening placements are rare.

**\*Please Note: The Summer Child Life Practicum will be:**

Part-Time: 6 weeks, 6-hour shifts, varying 3 days of the week

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

Please provide any additional pertinent information below regarding your schedule or any conflicts for the upcoming **Summer**.

## Submitting Your Application

- Application Packets should include the following materials:
  - Completed application (typed and signed)
  - Unofficial transcripts from all universities or colleges attended
- Please double check your application and all supplemental materials for completeness, accuracy, and professionalism.
- Please carefully read the minimum qualifications for practicum student candidates to ensure that your application meets eligibility criteria.
- Completed application packets should be emailed directly to the following address:  
[childlifepacticumstudents@health.ucdavis.edu](mailto:childlifepacticumstudents@health.ucdavis.edu)
- All materials should be emailed together; separate materials or incomplete application packets will not be considered.
- Applications must be emailed by due date. Applications emailed after the deadline will not be able to be considered.

I attest that the information in this application is true and accurate to the best of my knowledge.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

For any questions, please contact the UC Davis child life department at  
[childlifepacticumstudents@health.ucdavis.edu](mailto:childlifepacticumstudents@health.ucdavis.edu)