



CHILD LIFE PRACTICUM APPLICATION

	Candidate Information
Full Name	
Email	
Phone Number	

Are you affiliated with a North Carolina academic institution?

Please provide the name and contact information for your academic program coordinator:

What is your degree level?

What is your degree status?

Select an experience that demonstrates your work with children in or outside of a healthcare setting. Provide a specific example of how this experience expanded your Readiness Knowledge, Skills, and Abilities in preparation for your role as a child life practicum student. (200 word limit):

Describe a situation that prompted you to self-reflect on your personal views and experiences related to DEI and how that translates to the work of child life specialists (200 word limit):

[Empty rectangular box for text entry]

How do you hope to grow in your practicum? (200 word limit):

[Large empty rectangular box for text entry]