



Music Therapy Internship Application

Application Information

Thank you for your interest in the Music Therapy Internship at UNC Health. Please read this application thoroughly and provide all necessary information to complete your application process.

PROCESS:

Our application process for internship has multiple steps and is an intensive process. Here are the steps for a complete application submission:

- Virtual Q&A Session
- Application Submittal
- In-Person Interview & Audition
- Notification of Selection

Note: a virtual Q&A session can be scheduled with our team before deciding to submit an application.

DATES:

For Winter/Spring internship start, the deadline for the applications is **October 1**.

For Fall internship start, the deadline is **April, 1**.

INSTRUCTIONS:

All completed forms should be submitted to: clinicaledreg@unchealth.unc.edu

You will receive a confirmation of submittal within 3 business days of it being received. Following the application review, you will be notified to schedule a meeting for an interview and audition.

QUESTIONS:

All questions related the Music Therapy Internship can be sent to: musictherapy@unchealth.unc.edu



Personal Information

Please complete form below.

Full name: _____ Date: _____
Last First M.I.

Address: _____ Phone: _____
Street address Apt/Unit #

_____ Email: _____
City State Zip Code

University: _____ University Supervisor: _____

Primary Instrument: _____ Years Studied: _____

Supporting Documentation

Please attach copies of the following supporting documentation.

1. Completed Application
2. Resume
3. Academic Transcript (Unofficial)
4. Essay Questions
5. 3 Video Samples of Musical Skills (Please send via YouTube link)
6. 3 Letters of Recommendation

Essay Questions

Please attach responses to each of the following open-ended essay questions.

1. What is your philosophy of music therapy?
2. Why are you interested in this internship site?
3. What are your career goals in music therapy?
4. Who are your musical role models, and why?
5. What do you hope to accomplish during your music therapy internship?

Disclaimer & Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____