

APPLICANT INFORMATION

Please complete all applicable fields. Longer responses may continue within the expandable text areas.

First and Last Name

Home Address

☐ Home and Mailing Address are the same.

Mailing Address

Email Address

Phone Number

Name of Graduate School

Program Type

Before you begin

Lantern Lane Farm Counseling Center is a faith-based nonprofit organization. All practicums and internships take place at our Mt. Juliet location. Please answer candidly and completely.

SCREENING QUESTIONS

1

If your program has a site-selection deadline, what is that date?

MM/DD/YYYY

2

All counseling practicums and internships take place at our Mt. Juliet location. Are you available to serve at this location?

☐ Yes

☐ No

3

What is your desired start date for practicum or internship?

MM/DD/YYYY

4

What is your projected internship completion date?

MM/DD/YYYY

5

What is your projected graduation date?

MM/DD/YYYY

6

We do not typically accept applications for less than the entirety of a student's practicum/internship experience. A one-semester placement or changing sites each semester can be too disruptive for clients. Select the scenario that best describes you.

For a special circumstance, email internship@lanternlanefarm.org and briefly explain below.

☐ Applying for the entire experience

☐ Transferring from another site

☐ University-based initial practicum

☐ Special circumstance

7

How many direct clinical hours will you need each semester in order to graduate? (2000 characters max)

SCREENING QUESTIONS

8

Supervision is scheduled regularly at the date and time communicated by Lantern Lane Farm. Will you be able to attend regularly? (2000 characters max)

☐ Yes

☐ No

☐ Need schedule details

9

We aim to provide a well-rounded experience. Are you willing to work with clients outside your ideal population? Select all that apply. (2000 characters max)

☐ Children

☐ Families

☐ Couples

☐ Individuals

☐ Yes, all populations

☐ Need to discuss

10

What client population are you MOST interested in working with? (2000 characters max)

11

What client population are you LEAST interested in working with? (2000 characters max)

12

Regarding your least-preferred population, briefly explain what gives you the most pause. (2000 characters max)

SCREENING QUESTIONS

13

Why would you like to intern at Lantern Lane Farm? (2000 characters max)

14

What clinical issues hold the greatest interest for you? (2000 characters max)

15

What is your current preferred therapeutic method or model, and why? (2000 characters max)

16

What would you need most from supervision? (2000 characters max)

SCREENING QUESTIONS

17

What do you anticipate being your strengths as a clinician? (2000 characters max)

18

What do you anticipate being your biggest challenges as a clinician? (2000 characters max)

19

What do you do for your own personal growth and development? (2000 characters max)

20

What are your goals for practicum or internship? (2000 characters max)

SCREENING QUESTIONS

21

What are your current aspirations after graduation? (2000 characters max)

22

Every profession has its flaws. What do you see as a flaw in the counseling profession that you are passionate or concerned about? (2000 characters max)

23

Lantern Lane Farm is a faith-based nonprofit organization. How has your faith journey prepared you to work in the counseling field? (2000 characters max)

24

How do you see your faith impacting your work with clients? (2000 characters max)

SCREENING QUESTIONS

25

What are your potential days and hours of availability for practicum or internship? (2000 characters max)

Please be as specific as possible and include daytime, evening, and weekend availability.

26

Everyone is asked to attend a monthly staff meeting on the second Tuesday of each month from 9:00-10:30 a.m. Are you able to attend? If not, please elaborate. (2000 characters max)

☐ Yes

☐ No

27

Staff meetings commonly open or close in prayer. How would this feel for you? (2000 characters max)

Applicant acknowledgment

☐ I confirm that the information provided is accurate to the best of my knowledge.

Typed signature (full name)

Date (MM/DD/YYYY)