INTERNSHIP APPLICATION

Consejo is an equal opportunity employer. All employees and potential employees will be considered without regard to race, color, religion, creed, national origin, ethnicity, political affiliation, sex, sexual orientation, gender identity, gender expression, genetic information, political ideology, marital status (including committed unmarried relationships), age, veterans status, status as a breastfeeding mother, victim of sexual assault, domestic violence, any other protected class under state, federal or local law or the presence of any sensory, mental and physical disability unless the factor involved would, notwithstanding reasonable accommodation, prevent the proper performance of the work to be assigned. All applicants are screened and consideration is given to job-related criteria such as training, education, skills, interview, aptitudes, experience, and previous work record. Our Equal Employment Opportunity policy applies to all aspects of employment – recruitment, selection, training, promotion, demotion, transfer, compensation and benefits, layoff, recall, and termination. Employees are strongly urged to immediately report to Human Resources anything that may violate this policy. The Company prohibits retaliation against any employee who reports unlawful discrimination.

Please complete all fields. Incomplete information could disqualify you from further consideration.

PERSONAL INFORMATION		
First Name:	Middle Initial:	Last Name:
Full Address (street, city, state, and zip code):		
Phone:	E-Mail:	
Are you able to perform the essential functions of the position for which you are applying, with or without reasonable accommodation? ☐ Yes ☐ No		
Are you eligible to work in the U.S.? ☐ Yes ☐ No		

REFERRAL SOURCE
How did you hear about us?
Have you ever volunteered/interned/worked for Consejo before? ☐ Yes ☐ No If yes, explain:
Do you know anyone who works for Consejo? ☐ Yes ☐ No If yes, who?

LANGUAGE ABILITIES				
	Read	Write	Speak	Understand
English	☐	☐	☐	☐
Spanish	☐	☐	☐	☐
Other:	☐	☐	☐	☐

EDUCATION	
University/College (currently attending):	
Degree Sought (e.g., AA, BA, etc.):	Program (e.g., SW, Mental Health Counseling, etc.):
Name, title, and email address of the academic staff member who oversees your practicum/internship requirements:	
Do you currently hold any credentials relevant to this internship (e.g., AAC, SUDPT, etc.)? ☐ Yes ☐ No If yes, please provide the credential type, credential number, and expiration date:	
List notable coursework you've completed that is relevant to the internship you are seeking at Consejo:	

INTERNSHIP REQUIREMENTS		
Type of placement sought (e.g., practicum, internship, or both; MSW students – specify if generalist or clinical specialization):		
List the start and end dates (MM/DD/YY-MM/DD/YY) for each term during which you plan to intern:		
Total Practicum/Internship Hours Required:	Total Direct Client Contact Hours Required (if applicable):	For MFT Students, Total Relational Hours Required:
Total number of hours per week you are seeking to intern:		
Please describe any required supervisor qualifications or supervision requirements:		
What activities are you required by your academic institution to engage in during your practicum/internship?		

LOCATIONS

Please select all locations that you are open to intern at. Please note that not all locations may have open internship opportunities.

All of our locations are currently open Monday through Friday, from 8AM to 5PM.

- ☐ MOUNT VERNON | 1601 East College Way Mount Vernon, WA 98273
- ☐ BELLEVUE | 13343 Bel-Red Rd Bellevue, WA 98005
- ☐ SOUTH PARK | 8615 14th Ave S Seattle, WA 98108
- ☐ RENTON | 723 SW 10th Street, Renton, WA, 98057
- ☐ TACOMA | 5915 Orchard St W Tacoma, WA 98467
- ☐ GRAHAM | 21120 Meridian Ave E Graham, WA 98338
- ☐ SHELTON | 627 W Franklin St Shelton, WA 98584

DISCLAIMER AND SIGNATURE

Please read before signing:

I understand that neither the completion of this application nor any other part of my consideration for internship establishes any obligation for Consejo to hire me. I understand that no representative of Consejo has the authority to make any assurance to the contrary.

I authorized Consejo Counseling and Referral Service to obtain a consumer report. I understand that inquiry may include, but not limited to: conviction records, motor vehicle records, credit checks, references, employment verification, education verification and copies of prior personnel files.

If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of internship work or immediate dismissal.

I attest with my signature below that I have given to Consejo true and complete information on this application. No requested information has been concealed.

Signature:	Date:

THIS APPLICATION IS VALID ONLY FOR 60 DAYS FROM THE DATE ABOVE.