



Empower Recreational Therapy - Internship Application

Student Information

Name:

Date:

Current Address:

Permanent Address:

Email:

Phone:

University:

Date of birth:

Expected Graduation Date:

Approximates Dates of Availability for Internship:

Start Date: _____ *End Date:* _____

Academic Internship Supervisor Information

Name:

University Address:

Email:

Phone:

Student Internship Questions

1. Identify three goals for your internship experience.

2. Are there any commitments or engagements that will affect your attendance? (i.e., weddings, trips, etc.) If so, please explain.

3. Why did you choose Recreational Therapy as your major?

4. What are your career goals?

5. List any personal or professional skills that you have that would enhance your ability to complete this experience:

6. What is your philosophy of Recreational Therapy?

7. Why do you think Empower Recreational Therapy would be a good fit for you to complete your internship?

Internship Requirements

Applicant Checklist	Official Internship Offer Checklist
Internship Application <input type="checkbox"/>	<i>If you are selected for the internship experience with EmpowerRT, an official offer is contingent upon completing and passing the following items:</i>
Resume <input type="checkbox"/>	TB Test <input type="checkbox"/> *Provided by University Health Center
Cover Letter <input type="checkbox"/>	Copy of Liability Insurance <input type="checkbox"/> *Purchased through University
3 Professional References <input type="checkbox"/> *Minimum- 1 Letter of Recommendation	Signed Affiliation Agreement between University & EmpowerRT <input type="checkbox"/>
Copy of unofficial transcript <input type="checkbox"/> *Minimum of 3.0 GPA	Background Check & Drug Test <input type="checkbox"/> *Provided by EmpowerRT

Please submit application materials to:

Laura Kelly, Founder / Owner
lkelly@empowerrectherapy.com
(717) 793-0687