



AgeSong Institute – Pacific Institute Internship Program

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Name: _____ Signature _____ Date _____

Best Ph# to be reached at _____ Other Ph.#: _____

Email address _____ Mailing address _____

Graduate Institution: _____ Department/ School : _____

Type: ___ Clinical ___ Counseling Other (specify) _____

Degree: ___ M.A. Ph.D. ___ Psy.D. ___ Ed.D ___ Other (specify) _____

List all undergraduate and graduate programs that you have attended.

1. _____
2. _____
3. _____

Dissertation Topic (when applicable):

Current Status of Dissertation: *Date Completed or Expected*

Proposal approved _____ Defended _____ Course work _____

Letters of recommendation will be coming from the following (Name and contact info: phone or e-mail)

1. _____
2. _____
3. _____

What are your personal and professional “dreams”? (Please attach separate sheet if needed.)

Please circle the AgeSong Institute internship site that you would be interested in:

- AgeSong Institute in San Francisco-Laguna Grove Care/Hayes Valley Care
- AgeSong Institute in Emeryville-Bayside Park
- AgeSong Institute in Oakland-Lakeside Park (MFT/MFTI only)

(For Office Use) Application Material Received and Schedule for Interview	
_____ PI Summary Application _____ Vita _____ Bio/Testimonial –one page 1. _____ 2. _____ 3. _____ letters of recommendation	
_____ Fingerprinting _____ TB Test _____ 1st.Aid & CPR _____ Health Certification _____ Emergency Information	
_____ Date Scheduled Personal Interview _____ Leading Interviewer _____ Confirmed by	
Comments _____	