**Music Therapy Internship Application**

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

College/University \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Director of Music Therapy \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Director’s Contact Information\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Coursework Completion Date \_\_\_\_\_\_\_\_\_\_\_

Preferred start: August\_\_\_\_ October \_\_\_\_ No preference \_\_\_

Primary Instrument **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Please complete the following on a separate page.

**1: Please list and describe any Fieldwork/Practicum Experiences** (Please include location and a brief description.)

**2: Which Practicum Experience was your favorite? Why?**

**3: Which Practicum Experience was most challenging for you? Why?**

**4: List your related work/volunteer experience with children ages 1-12**

**5: What are your expectations of your internship program** (i.e. what you hope to gain from this experience, what you hope to learn and why you have chosen this population)**?**

**6: What is your current “philosophy” of music therapy?**

**Please provide at least 2 letters of recommendation and a copy of your transcripts.**

All applications are due **January 1st** of the year you intend to intern. Please email applications to: [tcorso@bridgewayohio.org](mailto:tcorso@bridgewayohio.org) or mail to Bridgeway Academy, c/o Tanya Corso, MM, MT-BC, 1350 Alum Creek Dr., Columbus, OH 43209.

This is a 7 month internship. We will start 2-4 interns at the beginning of August and 2-4 interns in Mid-October.

Please note that interns will be responsible for attaining an FBI and BCI background check (approximately $60) PRIOR to starting their internship. Please be advised that some universities require a legal agreement in addition to the Bridgeway Academy contract, which must be signed and agreed upon prior to the intern starting, which may in some rare cases delay the starting date of the internship.