The Gordon County
Child Advocacy Center
and Sexual Assault Center

Internship Application

Applicant Information

Full Name: _____

Phone: _____ Email: _____

Education

College/University: _____

Major/Program: _____

Year in School: ☐ Junior ☐ Senior ☐ Graduate ☐ Other: _____

Expected Graduation Date: _____

Seeking academic credit for this internship? ☐ Yes ☐ No

College Internship Contact Information

Please provide your college or university's internship or practicum coordinator information:

Name: _____

Title/Department: _____

Email: _____

Phone: _____

Mailing Address: _____

Internship Details

Semester Applying For: ☐ Fall ☐ Spring ☐ Summer ☐ Other: _____

Preferred Focus Area(s):

☐ Victim Services / Advocacy

☐ Community Outreach & Prevention

☐ Administrative / Program Support

Availability (Days/Hours): _____

Start Date: _____ End Date: _____

Weekly Hours Available: _____

Background & Experience

Relevant Coursework or Experience:

Have you worked or volunteered with victims of abuse or trauma before?

☐ Yes ☐ No If yes, please describe:

Do you have reliable transportation? ☐ Yes ☐ No

Are you willing to undergo a background check? ☐ Yes ☐ No

Short Answer Questions

(Please answer briefly)

1. Why are you interested in interning with the Gordon County CAC/SAC?

2. What do you hope to learn or gain from this experience?

3. What qualities or strengths do you bring to this work?

4. How do you typically manage emotionally challenging or stressful situations?

Applicant Acknowledgment

I certify that the information provided is true and complete to the best of my knowledge. I understand that an internship with the Gordon County Child Advocacy Center and Sexual Assault Center may involve exposure to sensitive and emotional subject matter, and I agree to maintain confidentiality and professionalism at all times.

Applicant Signature: _____ Date: _____