



**HSHS St. Vincent Children's Hospital  
Child Life Department  
Winter Practicum Application**

**Applications due: May 1st (EMAILED TO [childlife@hshs.org](mailto:childlife@hshs.org))**

Applicant Name:

Email:

Phone:

Current Address:

Current University/College:

Anticipated Graduation Date:

Academic Major:

Cumulative GPA:

**Relevant Child Life Coursework:**

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**Relevant Experiences with Children and/or Families**

Name of Organization:

Location:

Supervisor and Title:

Dates: to

Total Hours:

Description of Experience:

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Relevant Experiences with Children and/or Families

Name of Organization:

Location:

Supervisor and Title:

Dates: to

Total Hours:

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Relevant Experiences with Children and/or Families

Name of Organization:

Location:

Supervisor and Title:

Dates: to

Total Hours:

Description of Experience:

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### **Practicum Essays**

1. Why do you want to go into the field of child life? (Approximately 200 words)

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