



## Application for Practicum Placement

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

What School are you attending? \_\_\_\_\_

What Program are you in? \_\_\_\_\_

Contact information of School Supervisor: \_\_\_\_\_

Which program are you interested in? (See website for program description.) *Please circle*

Transition House    PEACE (CWWA)    Community Based Victim Services    Outreach  
Stopping the Violence Counselling    Administration    Donations    Other

Which of the following do you have? *Please circle*

Current First Aid    Valid Class 5 Drivers Licence    Reliable transportation

What number of hours/days per week would you like your placement to be?

Please specify \_\_\_\_\_ OR

Full Practicum: Please specify \_\_\_\_\_

### **Please Read Carefully**

The statements above are correct to the best of my knowledge. I understand that any misrepresentation may disqualify my placement. If placed, I agree to abide by the policies of Ishtar Transition Housing Society.

Applicant Signature \_\_\_\_\_ Date: \_\_\_\_\_

**Approved to Place by Program Director:**

\_\_\_\_\_ Date: \_\_\_\_\_