

Cincinnati Children's Mental Health Music Therapy Internship Application

Name	
Requested start date	
Address	
Permanent address	
Phone number	
Email	
College/University	
Academic director	
Academic director's email	
Date academic coursework will be completed	
Degree(s) to be awarded	
Major instrument	
Years studied	

Ensure that the following are submitted for your electronic application *(see application instructions on internship website for more details)*:

- This application form
- Resume
- Essays
- Link to YouTube videos
- Coursework description
- Electronic transcripts *(if using unofficial transcripts)*

Ensure that the following are being sent from the source to mentalhealthMTinternship@cchmc.org:

- Transcripts *(if using official transcripts)*
- 3 letters of recommendation
- Letter of eligibility from academic director *(if not included in letters of recommendation)*