

Dear Counseling Graduate Student:

Thank you for your interest in a graduate level counseling internship at the Hays-Caldwell Women's Center. We accept graduate-level counseling students who are working on a practicum or internship requirement. Interns help us expand our assistance to victims of domestic violence, child abuse, and sexual assault and abuse. A counseling internship at HCWC can be a rewarding experience.

Safety is a primary concern at HCWC, because it is not uncommon for the victims we serve—men, women and children—to be living in unsafe situations. To promote safety, HCWC facilities are locked and gated; access is controlled. All employees, volunteers and interns must pass criminal background checks and reference checks. Information obtained is confidential as provided by law and is used and retained only as authorized by law.

All HCWC employees, interns and direct-service volunteers must complete HCWC Advocate Training, an intense 40-hour overview of abuse and an introduction to issues involved in serving HCWC clients. Advocate Training hours apply toward required internship hours.

To apply for a HCWC Graduate Counseling Internship:

- Obtain an application from our website.
- Mail or fax your completed application to:

**Volunteer Coordinator
HCWC
P.O. Box 234
San Marcos, TX 78667**

Fax (512) 353-2018

- Submit your application several weeks or months prior to our scheduled training dates. Training begins:
 - **Fall – September 2, 2014**
 - **Spring – January 27, 2015**
 - **Summer – June 1, 2015**
- **Initial Interview:** After your application is reviewed, the HCWC Volunteer Coordinator will schedule an initial interview. One of the goals of the initial interview is to determine whether or not an internship at HCWC could meet your needs and ours.
- **References:** You will need references from two people: one should be a professor you've taken a class from in the past year. The other can be another professor or a personal reference, but not a family member. At the interview, you will receive two postcards to give to your references.
- **Notification:** The Volunteer Coordinator will notify you whether or not you've been selected for a second interview.
- **Second Interview:** The Counseling Program Director or Roxanne's House Program Director will conduct a second interview with selected applicants. Background checks will be completed on all counseling intern applicants selected for second interviews. Roxanne's House applicants and those working with children will submit to a general and a CPS background check.
- **Final Selections:** HCWC counseling intern selections will be made based on the interviews, reference checks and criminal background checks.
- **Advocate Training:** All counseling interns must complete Advocate Training before beginning counseling with HCWC clients.

For more information about HCWC counseling internships, please e-mail Kate Shaw, Volunteer Coordinator at kshaw@hcwc.org or call (512) 396-3404, ext. 222.

You may also learn more about HCWC through our website, **www.hcwc.org**.



Outreach Children's Counseling Intern will work with children who have witnessed family violence. You may:

- Provide individual counseling with child witnesses. This may include Play Therapy, Sand Tray Therapy or other modalities of Children's Counseling.
- Provide Sibling Therapy
- Co-lead a Children's Psycho-Educational group
- Co-lead a Parenting group

Roxanne's House Children's Counseling Intern will work with children (and/or their protective caregivers) who are victims of child sexual and/or physical abuse. You may:

- Provide individual counseling for female and/or male child victims of abuse. This may include Play Therapy, Sand Tray Therapy or traditional talk therapy.
- Provide individual counseling for siblings and/or protective caregivers of child.
- Co-facilitate child or teen sexual abuse support group.
- Co-facilitate protective caregivers support group.

Sexual Assault and Abuse Services Intern will support adult victims of sexual assault and childhood sexual abuse who are living in the community. You may:

- Provide individual counseling for female and/or male victims of sexual assault and/or abuse
- Co-lead support groups for adults molested as children or for recent victims of sexual assault
- Respond to local hospital calls to support recent victims of sexual assault
- Conduct intake documentation for incoming clients

Family Violence Outreach Program Intern will support adults and their children who are victims of domestic violence living in our community. You may:

- Provide individual counseling for female and/or male victims of family violence
- Co-lead support groups for victims of family violence
- Co-lead a parenting program group
- Respond to local hospital calls for support for victims of domestic violence
- Conduct intake documentation for incoming clients



Graduate Level Counseling Internship Application

Today's Date: _____ Semester of Internship (i.e. Spring 2015) _____

Name: _____

Address: _____
Street City State Zip

Home Phone: _____ Work Phone: _____

Cell Phone: _____ E-Mail: _____

Employer: _____ May we contact your work? Yes No

Please circle the best way to contact you weekdays, 9a – 6p? Work Home E-mail Cell

Emergency Contact: _____ Phone: _____

How did you hear about volunteering with HCWC? Check all that apply:

- Special Event / Career Fair TV Radio Newspaper Employer Speaker
 School Our Website Volunteer Match TV Current HCWC Volunteer
 Other: _____

What university do you attend? _____

Undergraduate major _____ Graduate major (if applicable) _____

Expected graduation date _____

Who is your internship supervisor? _____

Phone Number _____ Email address _____

How many hours are you required to complete for your internship program? _____

Please specify your program's requirements for your on-site supervisor:

Please specify any other program criteria applicable for internship

What specifically interests you about working in the field of family violence and sexual assault?

What work/volunteer experience do you have working with survivors of child abuse, family violence and/or sexual assault & abuse?

Why did you choose to apply with HCWC over other internship opportunities?

What would you like to gain from your experience at HCWC?

Please indicate the times you would be available during your internship:

Weekdays Weekends Evenings

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
9							
10							
11							
12							
1							
2							
3							
4							
5							
6							
7							
8							
9							

Are you bilingual? Yes or No

If yes, which language? _____ Speak Read Write

Are you a current or former client of HCWC? Yes No

If you were a former client, please tell us when _____
(If you are currently a client or have been a client, there is a one year waiting period before you are eligible to volunteer.)

Have you ever been convicted for a violation (other than a routine traffic violation, i.e. Class C misdemeanor) or are you currently on deferred adjudication or probation? Yes No
If yes, please list and describe offense and when it occurred:

I hereby affirm that my answers to the foregoing questions are true and correct and that I have not knowingly withheld any fact or circumstance that would, if disclosed, affect my application unfavorably. I understand that any false information submitted in this application may result in my discharge.

Signature of Applicant

Date

HAYS-CALDWELL WOMEN'S CENTER
Skill Inventory

Please check the skills that you have and would be willing to use as a volunteer for the Women's Center.

- Accounting
- Artistic
- Bilingual
- Career Building
- Carpentry
- Case Management
- Child Care
- Cleaning
- Computer Repair
- Computer Programming
- Copy Machine Operation
- Crisis Intervention
- Data Entry
- Decorating
- Dynamics of DV/SA
- Electrical
- Evaluation/Analysis
- Event Planning
- Facilitating Support Groups
- Filing
- Fundraising
- Gardening
- Heavy Lifting
- Grant Writing
- Graphic Design
- Hair Stylist
- Home Repair
- House Painting
- Influential Community Contacts
- Journalism
- Landscaping
- Legal Advice

- Library Science
- Licensed Counselor
- Listening
- Marketing
- Mentoring
- Microsoft Access
- Microsoft Excel
- Microsoft Publisher
- Microsoft Word
- Microsoft Powerpoint
- Networking
- Organizing
- Parenting
- Phone Skills
- Photography
- Peer Counseling
- Public Service Announcements
- Public Speaking
- Research
- Resume Development
- Sewing/Alterations
- Sorting Donations
- Special Event Planning
- Teaching
- Technical Writing
- Transport Furniture
- Transportation
- Training
- Tutoring
- Typing
- Volunteer Management
- Web Development

List any other skills you would like to use as an HCWC intern:

HAYS-CALDWELL WOMEN'S CENTER
Intern Agreement of Confidentiality

The Hays-Caldwell Women's Center is committed to the safety and welfare of its clients. The Center is also committed to the confidentiality of all information regarding its clients as a means of ensuring their safety.

Confidentiality is defined as the assurance that access to information regarding any client shall be strictly controlled, and that any violation of such control shall be a breach of faith. Confidential information shall include but is not limited to:

- Communications, information and observations made by, between or about adult and child clients, staff, volunteers, student interns and board members.
- Addresses of employment, residence and family addresses of clients, staff, volunteers, student interns and board members.
- Names of clients, staff, student interns and volunteers unless the individual provides written permission which is to be approved by the Executive Director.
- Photographs taken of clients, staff or volunteers.

Volunteers must never release confidential information, either over the phone or in person, about the Center and its clients without the express permission of the Executive Director or a designated staff member. This includes release of information to board members, criminal justice personnel, family members, community supporters or other interested parties.

I have read the Center's Agreement of Confidentiality and agree to abide by its conditions of confidentiality. I understand that these conditions apply to me as I serve as a volunteer and continue to be binding on me when I leave the Center, and that a violation may be grounds for termination of volunteer status and possible civil liability.

Signature of Applicant

Date

Traditionally, the names of the HCWC volunteers and their hours for a given year are posted in the annual report to the Board of Directors. Funders and other agencies may have access to this report. **Initial if you would rather your hours posted as "Anonymous" in the next annual report.** ___Volunteer's names are usually posted in the newsletter that is published after the most recent advocate training. **Please initial if you would rather not have your name posted in the newsletter.**

HAYS-CALDWELL WOMEN'S CENTER
Intern Release of Liability

The Hays-Caldwell Women's Center (HCWC) is unable to assume any liability on behalf of volunteers. Please read the following statements releasing HCWC from liability and indicate your understanding by your signature below.

LIABILITY RELEASE

I AGREE to respect the persons, privacy, and possessions of the clients, staff, and volunteers of the Hays-Caldwell Women's Center and to ensure that my children do the same.

I RECOGNIZE that I alone am responsible for my safety and health, the safety and health of my children, and the safety and health of any other persons who might accompany me. I alone am responsible for my (our) possessions. The staff and/or volunteers at HCWC cannot safeguard or be responsible for my children, our possessions, or me.

In respect to the services provided by HCWC to me and to those accompanying me, I UNDERSTAND that HCWC assumes no liability or responsibility whatsoever in connection with the services provided, for any act of omission or commission which might be constituted as negligence; nor for any loss, theft, or injury to persons or property; nor, during any transportation by staff, volunteers, or clients to or from any location; nor for any illness, damage, or inconvenience sustained by me, my children, or others accompanying me.

I AGREE to hold HCWC, its staff, employees, interns, agents, volunteers, contributors, officers, and directors harmless from any and all claims, demands, debts, responsibilities, and/or liability relating to me, my children, or those accompanying me.

By signing below, I certify that I have read and understood the above release of liability.

Signature of Applicant

Date