



CALIFORNIA EDUCATIONAL MFT STIPEND PROGRAM

2013-14 Application Form – Part I

APPLICATION DEADLINE: October 15, 2013

APPLICANT IDENTIFYING INFORMATION (Please type or print legibly)

Full Name: Last First Middle Initial

Address: Street Address Apartment/Unit City/State Zip Code

Permanent Address: Street Address Apartment/Unit City/State Zip Code

Primary Email: Secondary Email:

Cell Phone: Home Phone:

SCHOOL INFORMATION

School Name: Campus Site:

Enrollment Date: Degree Conferral Date:

School Administrator / Faculty Advising Applicant: School advisor's signature implies that the applicant is in good academic standing and the applicant's anticipated or conferred degree date is between 7/1/13 – 12/31/14. Print Name / Title Signature / Email Address

APPLICANT SIGNATURE

I read and understood the information in the 2013-14 MFT Stipend Program. I read and understood the provisions of the Payback Agreement. I affirm that I can legally work in California and will qualify for an MFT intern number. I affirm that the information provided in Part I, II and III of this application is truthful and accurate.

SIGNATURE: DATE

Candidate ID Number: Postmarked Date:

# 2013-14 Application Form – Part II

## APPLICANT QUALIFYING INFORMATION

(Check all that apply)

Indicate below the qualifications you bring to public mental health service.

Refer to the Application Guide for explanation of each category. DO NOT INCLUDE YOUR NAME OR SCHOOL.

### **1. COUNTY OPERATED OR COUNTY CONTRACTED FIELD PLACEMENT TRAINING:**

I received my field practicum training as a student at the following agency that is operated or contracted by a county mental health department:

Name of agency: \_\_\_\_\_ City: \_\_\_\_\_ County: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Dates of field practicum training: Started: \_\_\_\_\_ Ended: \_\_\_\_\_

### **2. COUNTY OPERATED OR COUNTY CONTRACTED EMPLOYMENT/VOLUNTEER EXPERIENCE:**

I have current or prior employment or volunteer experience at the following service agency that is operated or contracted by a county mental health department:

Name of agency: \_\_\_\_\_ City: \_\_\_\_\_ County: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Dates of employment/volunteer experience: Started: \_\_\_\_\_ Ended: \_\_\_\_\_

**3. LANGUAGE CAPACITY:** The needed languages for the MFT Consortium of Orange County are American Sign Language, Arabic, Korean, Spanish, and Vietnamese. I have second language proficiency in one of the needed languages and I am willing to commit to find employment at an approved mental health agency to provide services to consumers using my second language.

My second language is: \_\_\_\_\_

### **4. NON-COUNTY OPERATED OR NON-COUNTY CONTRACTED FIELD PLACEMENT TRAINING:**

I received my field practicum training at the following community agency that prepared me to serve consumers in public mental health care.

Name of agency: \_\_\_\_\_ City: \_\_\_\_\_ County: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Dates of field practicum training: Started: \_\_\_\_\_ Ended: \_\_\_\_\_

Indicate specialized training received in public mental health delivery: \_\_\_\_\_

**5. EMPLOYMENT IN UNDERSERVED AREAS:** I am willing to commit to find employment at an approved mental health agency to provide services to consumers in the underserved communities of Orange County.

**6. EMPLOYMENT IN MHSA PROGRAMS:** I am willing to commit to find employment at an approved mental health agency to provide services to consumers in programs funded through MHSA that require services in the field such as schools and homes.

Candidate ID Number: \_\_\_\_ \_\_\_\_ \_\_\_\_

Regional Consortium: Orange County

## 2013-14 Application Form – Part III

### APPLICANT QUALIFYING INFORMATION – ESSAY

Complete the four essays below and attach your typed responses as part of your application. Each essay can be no longer than 150 words and must be double spaced and use 12 point font. For anonymity in scoring, do not include your name or school in your essay responses or in the header.

Refer to the *2013-14 Application Guide* when writing your essay responses. The three subject areas provided for each essay item in the *Application Guide* will be considered in the scoring of the essays. The objectives of the State Stipend Program are provided in the *MFT Stipend Program* and further explained in the *Application Guide*.

- 1. EXPLAIN HOW YOUR PERSONAL EXPERIENCES MEET THE OBJECTIVE OF THE STATE MFT STIPEND PROGRAM TO RECRUIT STUDENTS WITH CAPACITY TO WORK IN UNDERSERVED COMMUNITIES.**
- 2. EXPLAIN HOW YOUR PERSONAL BACKGROUND AND INDIVIDUAL STRENGTHS MEET THE OBJECTIVE OF THE STATE MFT STIPEND PROGRAM TO SERVE DIVERSE CLIENT POPULATIONS.**
- 3. EXPLAIN HOW YOUR EDUCATIONAL PREPARATION AND PRACTICUM TRAINING MEET THE OBJECTIVE OF THE STATE MFT STIPEND PROGRAM IN RECRUITING QUALIFIED CLINICIANS TO WORK IN THE PUBLIC MENTAL HEALTH SYSTEM WITHIN THE GUIDELINES OF THE MENTAL HEALTH SERVICES ACT.**
- 4. EXPLAIN HOW YOUR PROFESSIONAL CAREER PLANS MEET THE OBJECTIVE OF THE STATE MFT STIPEND PROGRAM IN RECRUITING STUDENTS WHO ARE PROFESSIONALLY COMMITTED TO COMMUNITY PRACTICE.**

### SUBMISSION OF APPLICATION

Mail together the completed application (Parts I & II), the typed essays (Part III), and page one of the *IRS W-9 Form* to the address below no later than October 15, 2013. Do not include any other items such as a résumé or cover letter.

**California Educational MFT Stipend Program  
Phillips Graduate Institute  
1990 Plummer Street  
Chatsworth, CA 91311**

### STIPEND SELECTION DATES

Students will be notified of their application's eligibility status by October 30, 2013 via applicant's primary email address. Applications will not be eligible if mailed after the deadline or not submitted as required. Applicants will be notified of their selection status the week of November 18, 2013. Applicants selected to receive a stipend must attend a mandatory Stipend Orientation Session on **December 6, 2013**. Failure to attend the orientation or to arrive on time will result in forfeiture of the stipend.