



CALIFORNIA EDUCATIONAL MFT STIPEND PROGRAM

2013-14 Application Form – Part I

	>>>> APPLICATION DEADLI	NE: October 15, 2013 44	144
APPLICANT	IDENTIFYING INFORMATION (Please	type or print legibly)	
Full Name:	Last	First	Middle Initial
Address:	Last	FIISL	whate mitial
Address.	Street Address		Apartment/Unit
	City/State		Zip Code
Permanent Address:			
	Street Address		Apartment/Unit
Primary Email:	City/State	Secondary Email:	Zip Code
Cell Phone:		Home Phone:	
SCHOOL INF	ORMATION OF THE PROPERTY OF TH		
School Name	e:	Campus Site:	
Enrollment [Date:	_ Degree Conferral Date:	
	inistrator / Faculty Advising Applicant: or's signature implies that the applicant is in	Print Name / Tir	
good academ	nic standing and the applicant's anticipated degree date is between 7/1/13 – 12/31/14.		
-		Signature / Ema	ail Address
of the Paybac	SIGNATURE derstood the information in the 2013-14 MF ck Agreement. I affirm that I can legally wor the information provided in Part I, II and III o	k in California and will qualify	for an MFT intern number.
SIGNATURE		DA	TE
Candidate	e ID Number:	Postmar	ked Date:

2013-14 Application Form – Part II

APPLICANT QUALIFYING INFORMATION

Candidate ID Number: __

(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.

contracted by a county mental health		County	
Name of agency:			
Contact Person: Dates of field practicum training:			
2. COUNTY OPERATED OR COUNT I have current or prior employment of operated or contracted by a county me	or volunteer experience at	MENT/VOLUNTEER EXPERIENCE: the following service agency that is	S
Name of agency:	City:	County:	
Contact Person:	Phone:	Email:	
Dates of employment/volunteer exper	ience: Started:	Ended:	
My second language is:	ON-COUNTY CONTRACTED at the following commun		/e
consumers in public mental health care		County:	
Name of agency: Contact Person:			
Dates of field practicum training:			
Indicate specialized training received in	n public mental health deli	very:	
 5. EMPLOYMENT IN UNDERSERVE approved mental health agency to proform or or	RAMS: I am willing ovide services to consumer	to commit to find employment at ar	of n

Regional Consortium: Orange County

CALIFORNIA EDUCATIONAL MFT STIPEND PROGRAM

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
19900 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.