



HARMONIC CHANGES
THERAPY SERVICES

INTERNSHIP APPLICATION

Full Name: _____ University: _____ Date: _____

Address: _____

Phone: _____ Email: _____

EDUCATION

College: _____ From: _____ To: _____

Address: _____

Music Therapy Department Chair: _____

Phone: _____ Email: _____

Desired Internship: January-June May – October September – February

Location: Los Angeles Chicago Telehealth

Major Instrument: _____ Years: _____

Minor Instrument: _____ Years: _____

Other Instruments Used in a Clinical Setting: _____

PERSONAL REFERENCES

Name: _____ Relationship: _____ Years: _____

Phone: _____ Email: _____

Name: _____ Relationship: _____ Years: _____

Phone: _____ Email: _____

Name: _____ Relationship: _____ Years: _____

Phone: _____ Email: _____



SCAN ME

www.HarmonicChanges.com

info@HarmonicChanges.com

818.394.0649





HARMONIC CHANGES
THERAPY SERVICES

Why are you choosing to apply for an internship at Harmonic Changes?

Areas for growth and areas of strength:

Skills you hope to develop or refine:

What do you expect to learn and/or accomplish as an intern?

What do you look for in a supervisor?



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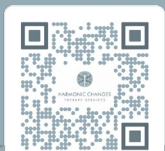
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Write a brief biography (3-5 paragraphs; extra pages are acceptable):



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SUBMITTING APPLICATION

Completed applications should be emailed to Hiring@HarmonicChanges.com along with a copy of:

- Your resume and cover letter
- Video examples of musicality and clinical skill

Three song submissions are requested

Please include a verbal explanation on why song was selected and the clinical goal and objective that the song and intervention is supporting.

Videos may be submitted through unlisted YouTube link. Please enter YouTube link for each video:

1. Singing with guitar

Client targeted with example: _____
 Clinical Goal & Objective: _____
 Comments: _____
 YouTube Link: _____

2. Singing with piano

Client targeted with example: _____
 Clinical Goal & Objective: _____
 Comments: _____
 YouTube Link: _____

3. Singing with instrument of choice

Client targeted with example: _____
 Clinical Goal & Objective: _____
 Comments: _____
 YouTube Link: _____

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge. If this application leads to an internship, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____



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