

Dear Applicant,

Thank you for considering joining Change Inc. at National Institute for Change, as you seek to pursue your career in forensic, substance abuse or domestic violence offender therapy. Participating in and completing an intensive training program like Change Inc. propels students forward in their professional development. Change Inc. students want to be the best clinicians they can and they stand out as professionals with the foresight to get rigorous training and earn additional credentials that will propel their careers and marketability.

To get the most from training, students must be open to challenges, willing to be active participants in our experiential training and supervision, and possess a desire to be the best therapist possible for themselves and their clients.

The mission of our staff is to provide state-of-the-art training, supervision, and apprenticeships for counselors seeking credentialing and growth with an emphasis on ethics, relevance, team-centered, evidenced-based care and real-world application. Our training staff's focus is creating an environment where student can experience a wide range of clinical milieu in a supportive and experiential environment.

We welcome your interest in the program. After your application is complete, (application, cover letter of intent, resume, two letters of reference) please mail it to:

Change Inc. Intern/Apprenticeship Admissions:

3225 S. Wadsworth Blvd. Unit T

Lakewood, CO 80227

Your application will be reviewed. If you qualify for an interview, you will be scheduled for an interview dates. We look forward to hearing from you!

Sincerely,

Philippe Marquis, M.A. L.P.C.

Joe Fojut M.A. L.P.C.

Executive Director

Clinical Director



APPLICATION FOR ADMISSION 2016

Date of Application:	
Applicants Name:	
Address:	
City:	State: Zip:
Phone: ()	Alternate Phone: ()
Email:	
Date of Birth (mm/dd/yyyy)	Gender:
Applying for (check one):	
INTERNSHIP (in last year of g	graduate school)
APPRENTICESHIP POST-GR	RADUATE POSITION (have a related Masters or Doctorate)
Training Experience/Exposure to fore	ensic therapy including substance abuse and/or domestic
violence offender therapy provider (li	ist workshops, classes, practicum, internships, etc.):



APPLICATION FOR ADMISSION 2016

Undergraduate Coll	lege/University:	
Location:		_ Graduation Date:
Degree Received (H	BA, BS, etc.):	
Major(s):		
G.P.A	_ Honors/Awards Received	1:
Graduate School: _		
Location:		
	BA, BS, etc.):	
•		ved:
	nation Present Employer:	
Address:		
Length of employm	nent:	
Clinical Experience	: :	



Reference Information: Provide two professional letters of recommendation along with your application regarding your clinical knowledge, skills, and potential. List the names and phone number or email for the people who you asked below:

Name:

Email/Phone:

Name:	Email/Phone:
Cover letter of intent:	
your interest in forensic, substant profession and your interest in C program fits with your profession Letters may include what you we	along with your application. Your letter should include nce abuse or domestic violence offender therapy as a Change Inc./National Institute for Change. Tell us how the onal goals and who you are as a person. Vill bring to the program, your strengths and weaknesses ant out of your time working with Change Inc. Letters ble spaced.
Resume: Provide a copy of your	r professional resume along with this application.
I intend to pursue (circle all that	t apply):
Certified Addiction Counselor	Approved Domestic Violence Provider
Licensed Professional Counselo	or Licensed Clinical Social Worker



Non Discrimination Policy: Change Inc./National Institute for Change does not discriminate in the admission of students, the provision of services or in employment based on the basis of age, culture, ethnicity, gender, physical ability, nationality, race, religion, or sexual orientation.

Change Inc. fosters understanding and respect for differences in our training program, clinical services, and employment practices. We actively recruit students and staff who will add to the diversity of our program and services provided. By signing this application I acknowledge that I intend to participate in all aspects of training toward earning my identified certification and/or license, if I am admitted:

Signature		
 Date	 _	