

Children's of Mississippi Child Life Practicum



Mail to: University of Mississippi Medical Center
Attn: Child Life Department
2500 North State St.
Jackson, MS 39216

Practicum Overview:

The child life practicum is a minimum of 100 hours of observation within the healthcare setting where qualified students gain practical knowledge about the child life profession. We offer a practicum opportunity in the summer.

- ❖ Applications for practicum program must be due by February 27th
- ❖ Applicants will be notified of acceptance status on or prior to the week of March 13th
- ❖ Incomplete or late applications will not be considered

All applicants must be enrolled in a college/university/academic program and receiving credit hours for the practicum. Contract between the hospital and school will need to be negotiated prior to start of practicum.

Requirements:

- Minimum of 50 volunteer hours in healthcare setting under direct supervision of a Certified Child Life Specialist
- Minimum of 50 hours working with well children in a structured environment (I.e. child development center, daycare, school, camp, etc.)
- Completed sophomore year with degree in child life, child development, or other related field

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Application:

- **Resume**
- **Child Life Practicum Application Form**
- **Child Life Relevant Coursework List**
- **Unofficial academic transcript**
- **Two recommendation letters:**
 - 1 from academic professor
 - 1 from non-family member who is able to attest to work experience with children
- **Sealed proof verifying work experience on official letterhead**
 - Minimum of 50 volunteer hours in healthcare setting under direct supervision of a Certified Child Life Specialist
 - Minimum of 50 hours working with well children in a structured environment (I.e. child development center, daycare, school, camp, etc.)
- **Attach a separate document briefly answering the following questions:**
 - Please describe child life in your own words.
 - Why are you interested in becoming a Certified Child Life Specialist?
 - What are your strengths in working with children?
 - What are your areas for improvement when working with children?
 - Describe three goals you hope to achieve by the end of the practicum experience.

Child Life Practicum Application



Personal Information:

Full Name: _____

Current Street Address: _____

City: _____ State: _____ Zip: _____

Current Email Address: _____

Phone Number: _____

Has the applicant completed sophomore qualifications at college/university/academic program?

Yes: _____

No: _____

Emergency Contact Information:

Full Name _____ Relation: _____

Primary Phone Number: _____

Secondary Phone Number: _____

University Information

University Attending: _____

Major: _____

Advisor's Name: _____

Email Address _____

Address: _____

Phone: _____

