



Children's of Mississippi Child Life Practicum

Practicum Overview:

The child life practicum experience at Children's of Mississippi provides a minimum of 100 hours of clinical observation within the healthcare setting where qualified students gain practical knowledge about the child life profession. Practicum opportunities are offered in the summer.

- ❖ Applications must be postmarked by Feb 1st. In the event the application deadline falls on a weekend or holiday, the next business day will become the deadline.
- ❖ Incomplete or late applications will not be considered.

All applicants must be enrolled within an affiliated academic program at a college or university, receiving credit hours for the practicum. A contract between the hospital and college/university must be established prior to the start of the practicum.

Prerequisites:

- GPA minimum of 3.0 in major concentration
- Minimum of 50 volunteer hours in healthcare setting
 - *Due to the ongoing COVID-19 pandemic and limited opportunities for volunteer engagement with children and families in a variety of settings, especially healthcare, this requirement will be waived for the 2022 summer practicum experience; however, volunteer experience in an established child life program or hospital setting is preferred.*
- Minimum of 50 hours working with well children in a structured environment (i.e. child development center, daycare, school, camp, etc.)
- Students must have completed their sophomore year or must be in their third year of college/university earning a degree in child life, child development, or other related fields.
- Students must have completed or currently be enrolled in a child life course taught by a Certified Child Life Specialist. In addition, at least two courses required by the Association of Child Life Professionals' Child Life Certification Committee must be completed. See [Academic Eligibility Requirements](#) for required coursework.
- Documentation of COVID-19 vaccination, along with other vaccine and health requirements, is required for affiliated students at Children's of Mississippi, a part of University of Mississippi Medical Center. Additional information can be found [here](#).

Application Requirements:

- Resume
- Cover letter
- Child life practicum application
- Unofficial academic transcript
- Two letters of recommendation. Letters must be signed on official letterhead and sealed, with signature across envelope flap.
 - 1 from an academic professor or advisor
 - 1 from a non-family member who is able to attest to the applicant's work experience with children
- Verification of 100 volunteer or work experience hours with children in a structured environment. Verification of hours must be documented utilizing the *Verification Form* included in the application. Please use a separate form for each institution.
 - Minimum of 50 volunteer hours within the healthcare setting (see prerequisites for Summer 2022 adjustments)
 - Minimum of 50 hours working with well children in a structured environment (i.e. child development center, daycare, school, camp, etc.)
- Please attach a separate document answering the following questions:
 - Explain your understanding of the role of a child life specialist within the healthcare setting.
 - Why are you interested in becoming a Certified Child Life Specialist?
 - What are your strengths in working with children and families?
 - What are your opportunities for growth in working with children and families?
 - What have you done to prepare yourself for this practicum experience?

Mail to: Children's of Mississippi
Attn: Child Life Department
2500 North State St.
Jackson, MS 39216



Child Life Practicum Application

Personal Information:

Full Name: _____

Current Street Address: _____

City: _____ State: _____ Zip: _____

Current Email Address: _____

Phone Number: _____

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

Yes: _____

No: _____

College/University Information:

College/University: _____

Major: _____

Major GPA: _____

Academic Advisor: _____

Email Address: _____

Address: _____

Phone: _____

Relevant Experiences Working/Volunteering with Children and Families

Please add additional information on a separate sheet if needed.

Healthcare Experience

Institution	Dates	Position	Brief Description of Responsibility	Ages	Total Hours

Well Child Experience

Institution	Dates	Position	Brief Description of Responsibility	Ages	Total Hours



Verification Form of Supervised Hours with Children

This form must be completed by a supervisor of each institution where the applicant completed hours working or volunteering with children.

Name of Applicant: _____

Institution: _____

Total Hours Completed: _____

Start Date: _____ **End Date:** _____

Type of experience- check one:

_____ Working/volunteering with well infants, children, youth, and/or families (*i.e. child development center, daycare, school, camp, etc.*)

_____ Working/volunteering with infants, children, youth and/or families in healthcare setting

_____ Working/volunteering with infants, children, youth and/or families in specialized settings (*i.e. camps for children with chronic illnesses, programs for children with special needs, advocacy programs, bereavement/hospice experiences, etc.*)

_____ Other. *Please explain:*

Applicant's Position/Title: _____

Description of Responsibilities:

Supervisor: _____

Signature/Title: _____

Email: _____

Phone: _____

Date: _____