

## HDVCH Music Therapy Internship Application

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### Materials and Requirements

Thank you for your interest in the Music Therapy Internship Program at Helen DeVos Children's Hospital. The next few pages have important information regarding the application process.

The music therapy internship is offered twice per year beginning in **May** and **August**. The application deadline for both internship rounds is **November 1st**. After careful review of all completed applications, the music therapy director will contact eligible applicants about setting up a virtual interview via Microsoft Teams.

Materials may be emailed to: **musictherapy@helendevoschildrens.org**

Or sent to: Helen DeVos Children's Hospital  
Attn: Music Therapy Services MC 237  
100 Michigan Street NE  
Grand Rapids, MI 49503

Please send your completed application with the following documents:

- Application cover page (provided on the following page)
- Complete **official** transcripts from all universities attended; photocopies are not permitted
- Three letters of recommendation addressing musical, clinical, and professional skills of applicant; Recommendations may be enclosed with other application materials or emailed to **musictherapy@helendevoschildrens.org** directly from the reference. (One must be a letter of eligibility from Academic Director)
- Current cover letter and resume
- Videos demonstrating the applicant's musical abilities; Applicant should play at least 3 songs which could be used in the pediatric setting. Demonstrations must include the applicant's main instrument along with piano, guitar and voice. A USB drive may be enclosed with application materials, or the applicant may email 'unlisted' YouTube links to **musictherapy@helendevoschildrens.org**.
- Written answers to the following questions:
  - a. Why did you decide to pursue music therapy as a career?
  - b. What do you hope to achieve during your internship?
  - c. What are your strengths, and what skills do you want to refine?
  - d. Describe one positive and one challenging experience you have encountered during your academic/clinical training?
  - e. Why are you applying for this particular internship site?

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# Application Cover Page

Applicant Name:

Preferred Start Date (May or August):

Address:

Phone Number:

Email:

University Attending:

Cumulative GPA:

Academic Director:

Academic Director's email:

Date academic work will be completed:

Degree(s) to be awarded:

Major Instrument:

Other proficient instruments: