

INSTITUTE OF MENTAL HEALTH DEPARTMENT OF DEVELOPMENTAL PSYCHIATRY

INTERNSHIP PROGRAMME IN CHILD MENTAL HEALTH APPLICATION FORM

| Personal Particulars | | | | |
|--|---------------------------------------|---|----------------------------|--|
| Full Name (Underline Surname): | | | Please | |
| Gender: M / F | ender: M / F Date of Birth: | | affix | |
| Email: | Contact No: | | photograph | |
| Mailing Address: | | | | |
| Programme Application | | | | |
| Psychology Undergraduate Internship | | Supervisor Preference (optional): Refer to website for list of available supervisors | | |
| Duration: 🔲 Full- | time (min 5 days/week | (for min 3 months) | | |
| Part- | -time (min 2 days/weel | k for min 6 months) | | |
| Specify availability i | n mm/yy – mm/yy: | | | |
| Graduate Clinical Attachment* Supervisor N | | Supervisor Name: | | |
| *Applicants should have se supervision in writing to this | · · · · · · · · · · · · · · · · · · · | s agreeable to undertake superv | ision. Attach agreement of | |
| Academic/ Education Qua | lifications | | | |
| School/ Major: | | Year of Study: 1 / 2 / | 3 / 4 / Others: | |
| Emergency Information | | | | |
| Name of Emergency Con | ıtact: | | | |
| Relationship: | | Contact No: | | |
| Declaration: | | | | |
| Have you ever been involved in proceedings or convicted in a court of law? | | | Yes No | |
| Have you ever had any disciplinary proceedings initiated against you? | | | Yes No | |
| Do you have any substan impact your capability to | · | ated conditions that may | Yes No | |
| By signing below, I decla | re that all the informat | ion submitted is true and corr | ect. | |
| Name & Signature: | | Date: | | |



Adding Years of Healthy Life

Application Procedures

To apply, please complete the application form and attach the following documents:

- 1. Cover letter
- 2. Resume
- 3. Copy of academic transcripts
- 5. Supervisor Agreement (For Graduate Clinical Attachment only)

Submit your completed application form and relevant documents via email to: dcap@imh.com.sg Incomplete applications will not be processed.

Note:

IMH does not offer remuneration for the internship programmes in Child Mental Health.

IMH reserves the right to amend the terms of the internships, including termination or withdrawal of the internship on disciplinary grounds, poor performance or circumstances that limit intern's abilities to perform their duty.

As per IMH policy, it is mandatory for all interns to be vaccinated against Measles and Tdap. Candidates who have been accepted into the internship programme are required to provide their vaccination records at the point of acceptance. Interns will be required to obtain the required vaccination(s) at their own cost, before the commencement of their internship.

CAP002/F02/R00: Internship Application Form