

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 to: imh.dcap@nhghealth.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