



Department of Human Services

NEW ACADEMIC COMPLEX ROOM 805 D

AAS/BS Programs

Accredited by the Council for Standards in Human Services Education

718 260-5415 Fax 718 254-8530

TO: ALL NEXT SEMESTER FIELD PRACTICUMS AND PROFESSIONAL INTERSHIP STUDENTS

FROM: DEPARTMENT OF HUMAN SERVICES / ACADEMIC INTERNSHIP OFFICE

**RE: PRE-PLACEMENT QUESTIONNAIRE FOR ALL FIELD/INTERNSHIP COURSES:
Associate: HUS 2305/HUS 2405 Field Practicum I & II
Bachelors: HUS 4701/HUS 4801 Professional Internship I & II**

- 1. REGISTER FOR A FIELD/INTERNSHIP COURSE FIRST**
- 2. COMPLETE THIS PRE-PLACEMENT QUESTIONNAIRE AND SUBMIT TO THE ACADEMIC INTERNSHIP COORDINATOR'S OFFICE ROOM 805 D IN HUS DEPT.**
- 3. UPON COMPLETION OF STEPS 1 – 2 YOU WILL RECEIVE A REFERRAL LETTER BY CITYTECH EMAIL TO ARRANGE AN AGENCY INTERVIEW FOR POSSIBLE ACCEPTANCE AS AN INTERN.**

NOTE:

- 1. It is the student's responsibility to comply with all deadlines and requirements of the HUS Department and referral agency in a timely manner. This way students can start their internship the first day/week of class. Do not wait until the internship class starts or you will be behind one week of hours. There are no incompletes for internship courses, as there is no NYCCT instructor overseeing the intern once the course ends, otherwise this poses a liability issue for the agency and student. The College does hold a malpractice licensure policy for student interns, ONLY during the duration of the course period.**
- 2. Some agencies may require health checks (vaccinations, PPD testing, etc.) as well as criminal background checks before accepting you as an intern. Please use the Student Wellness Center as a possible resource.**
- 3. Due to the FERPA Student Law of Confidentiality we do not respond to non-student emails. If your CityTech email is not working, go to the Student Center/Atrium.**



NEW YORK CITY COLLEGE OF TECHNOLOGY
THE CITY UNIVERSITY OF NEW YORK

285 NEW ACADEMIC COMPLEX, JAY STREET, BROOKLYN, NY 11201-2983

HUMAN SERVICES ACADEMIC INTERNSHIP OFFICE

ROOM 805 D • (718) 260-5415 • FAX: (718) 254-8530

HUMAN SERVICES DEPARTMENT
FIELD / INTERNSHIP PRE-PLACEMENT QUESTIONNAIRE

TO BE CONSIDERED FOR PLACEMENT REFERRAL STUDENTS MUST:

- a. **COMPLETE BY NEXT SEMESTER: ALL PREREQUISITE COURSES.**
- b. **RETURN THIS FORM TO THE HUMAN SERVICES DEPARTMENT (ROOM 805).**
- c. **REGISTER FOR THE APPROPRIATE INTERNSHIP COURSE.**
- d. **PREREQUISITS FOR HUS-2305 ARE ENG-1101, HUS-1101, HUS-1201 & HUS 1203**
- e. **PREREQUISITS FOR HUS-4701 ARE HUS-2405**

1. Check Internship Course: HUS 2305 ___ HUS 2405 ___ HUS 4701 ___ HUS 4801 ___

2. Last Name _____ First Name _____ EMPLID # _____

Address _____

Borough _____ State _____ Zip Code _____

Telephone (Day) (____) _____ (Eve) (____) _____

CityTech Email: _____@mail.citytech.cuny.edu

Due to the FERPA Law of Student Confidentiality, we do not use/respond to personal emails.

3. **Indicate your client population choice by choosing your first, second choice (1st, 2nd...)**

- ___ Alcohol and Substance Abuse
- ___ Child Welfare and Family
- ___ Disabilities Across the Life Span (physical/mental/developmental)
- ___ Gerontology (older adults/seniors)
- ___ Public Schools. If you know the public school (PS) please indicate: PS# _____
- ___ Employment. Must be Human Services related establishment please indicate _____
- ___ Other. Human Services Categories not listed _____

4. **Indicate your availability below. Due to agency/supervisor availability, we will not always be able to honor your request(s).**

- A. ___ Weekdays (generally during the hours of 9:00 am – 5:00 pm)
- B. ___ Evenings (generally from 4:00 pm - 7:00 pm) **Note: that we have limited evening hours.**
- C. ___ Weekends (generally from 9:00 am-5:00 pm) **Note: very limited, must be negotiated.**

5. **I wish to: (CHOOSE “A”, “B” or “C”):**

- A. ___ be referred to college’s internship site by the HUS Academic Internship Coordinator
- B. ___ recommend my current employment: **IF SO, STUDENT IS TO HAVE SUPERVISOR COMPLETE**

NEW AGENCY APPLICATION W/ RESUME AND DEGREE COPY AND THE FOLLOWING:

Director of Interns _____
 Agency Name _____
 Address _____
 Borough _____ State _____ Zip Code _____
 Phone (____) _____ Cell (____) _____
 FAX: (____) _____ email: _____

C. _____ recommend a new site: **IF SO, STUDENT IS TO HAVE SUPERVISOR COMPLETE NEW AGENCY APPLICATION W/ RESUME AND DEGREE COPY AND THE FOLLOWING:**

Director of Interns _____
 Agency Name _____
 Address _____
 Borough _____ State _____ Zip Code _____
 Phone Number (____) _____ Cell (____) _____
 FAX: (____) _____ email: _____

6. Are you currently employed? Yes _____ No _____ If yes, please indicate:
 Agency Address: _____
 Supervisor's Name/Email/Phone _____
 Your Work Tasks: _____

7. Please list your previous internships:

	AGENCY	COLLEGE	DATES
HUS 2305			
HUS 2405			
HUS 4701			

8. **Personal and Confidential:** Please describe any physical limitations, accommodations, family responsibilities, work schedule and/or other factors which should be a consideration in arranging a Professional internship assignment for you. (Include if you are part of SEEK, Center For Assessability, etc.)

9. **Student Goals for the Practicum.** Describe the kinds of experiences you would like to have in your area of concentration. Be sure to indicate the method you wish to learn more about i.e. community organization, group work or individual work.

All students must complete, the **Sexual Harassment, Gender-Based Harassment and Sexual Violence Curriculum Workshop**, online at the following website www.citytech.cuny.edu/title-ix

DECLARATION – I understand that Human Services professionals provide services without discrimination or preference based on age, ethnicity, culture, race, disability, gender, religion, sexual orientation or socioeconomic status in accordance with the Ethical Standards of Human Services Professional (2000). I also understand that Human Services Internship requires a commitment on my part to fulfill all Human Services Department requirements and deadlines as well as agency and course requirements as stated in The Field Practicum/ Professional Internship Guide, the Placement Questionnaire, the Student Field Practicum Agreement, the Professional Internship Contract, and the Field Practicum Manual.

Human Services Student Signature _____ Date _____