## Wellbeing Clinic for Older Adults Student Placement Application Form

Return this form, along with your CV and short cover letter to Jenny Linossier on jlinossier@swin.edu.au

1.	Date today:	
2.	Name (& Preferred Name):	SWINBUR UNIVERSIT TECHNOL
3.	Phone number:	
4.	Student Email:	
5.	Address:	
6.	This placement requires previous experience in ongoing one-to-one counselling with clie you have experience in this area?  Yes- please provide details:	ents. Do
7.	Are you able to attend compulsory online training and supervision every second Friday from 2.00-4.45pm Melbourne time?  Yes  No – Reasons:	rom
8.	What university or higher education provider are you enrolled in?	
9.	What course are you studying?	
10.	What year level are you currently enrolled in your course?  ☐ First year of my course ☐ Second year of my course ☐ Third year of my course ☐ Fourth year of my course	
11.	Excluding the Swinburne placement, please provide details of any previous/current place that you have completed or are completing. Is this your first, second, third or fourth place of your course?  □ First placement- Name of placement:	
	☐ Second placement - Name of placement:	
	☐Third placement - Name of placement:	
	☐Fourth placement - Name of placement:	

12.	Are you able to remain on this placement for a minimum of 6 months?  ☐ Yes ☐ No − Reasons:	SWI BUF * NE
13.	When would you like to start and end your placement?	SWINBLEN
	Start (Month & Year	UNIVERSITY
	End (Month & Year):	
14.	How many client contact hours (actual time spent with a client) do you need in this placement?	
15.	Does your University view a difference between face to face and telehealth client cor Yes No	ntact?
16.	How many days per week can you spend on placement?	
17.	Which days are you available for placement (tick all that apply)? Note that placement available on weekends or outside of normal business hours (9am-5pm)  Monday  Tuesday  Wednesday  Thursday  Friday	is not
18.	How many supervision hours do you need in this placement?	
19.	Are you able to travel to aged care facilities?  ☐ Yes ☐ No — Reasons:	
20.	Swinburne provides individual and group supervision for all students on this placement you organised any additional supervision for this placement?	nt. Have
21.	What do you hope to gain from working with older adults?	

22.	What prior experience (formal, or voluntary) do you have with older adults? Please describe, or write 'none'.
23.	Have you attached a cover letter that explains why you have applied for this placement & a CV? ☐Yes ☐No