

## Dear Applicant:

Thank you for your interest in our internship program. Behavior by Design is an independent

organization that provides direct care, consultation and training to the community through the use of

Applied Behavior Analysis. Using evidence-based practices, the goal is to decrease inappropriate

behaviors, while increasing appropriate ones. Additional general information:

- **O** Age range: Birth-adulthood
- Degree of Impairment: Moderate to severe impact Including but not limited to communication deficits, aggression, self-injury, toileting, and/or feeding needs
- All programming that is developed is individualized to meet the specific needs of the individual being served
- Strong emphasis placed on data collection and analysis to ensure adequate progress monitoring and development of behavioral programming
- **O** Typical hours of operation: Monday Friday 8:00 am 4:00 pm

Please complete the attached application packet and return either by fax or mail to:

## Behavior by Design 1 Rathton Road York, PA 17402 Attn: Internship Coordinator

# Fax #: (717) 600-8179

If you have any further questions, please contact Megan Robertson at 717-885-5906.

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### Mission Statement of the Internship Program

The goal of Behavior by Design (BXD) is to educate and empower those

individuals interested in working with significant [severe] challenging behaviors, associated with an Autism Spectrum disorder and/or other diagnoses. Through the use of empirical research, training, direct supervision,

and applied practice, the principles of Applied Behavior Analysis will be implemented in order to better the

lives of those who are affected with disabilities across the lifespan.

BxD ~ Engineering behavior today.....to build a better tomorrow!



## Behavior by Design- Internship Description

- Internship experience will be unpaid.
- Students will be required to obtain Act 114 (FBI fingerprint), Act 33 (Child Abuse clearance) and Act 34 (Criminal Record check) verifying that there is no previous criminal activity which prohibits contact with minors and/or individuals with a disability; students will also be required to show proof of a recent TB test (within 12 months of most recent test or return from international travels) showing a negative result.
- Students will be expected to complete an initial assessment to determine data collection skills and knowledge of ABA principles. This will be used to tailor the internship to each individual and to strengthen weaker skill areas/provide needed direct experience.
- All students will be held to the same requirements as employees of BXD; this includes signing off on and adhering to confidentiality/ HIPPA/FERPA, ethical and professional practice guidelines.
- Students will be required to report to their assigned Master's level Clinical supervisor regularly and as needed.
- Students who suffer from any physical problems, which may prevent or limit them from interacting and assisting with procedures will need to provide this information to Behavior by Design at the start of the internship.

The following list includes (but is not limited to) duties included as part of the internship experience:

- 1. Administrative duties such as receipt and appropriate filtering of phone calls , chart auditing, utilization review for insurance companies (service authorizations)
- 2. Data collection, analysis and interpretation
- 3. Reviewing staff documentation
- 4. Collecting intake information
- 5. Observing clinical work on-site with Behavioral Support Staff along with observing BCBA's.
- *6.* Attendance at all staff/team meetings, in-services and/or trainings as scheduled and appropriate; this may include BXD or at external sites
- 7. Participation in the development of behavior plan goals and objectives; implementation of interventions/protocols under the direct supervision of a BCBA
- 8. Writing concise summaries on journal articles and ABA books.
- 9. Complete a research project that will be presented at an all staff meeting.
- 10. Other designated tasks as assigned



# General Information

Name (please print):

#### Contact information:

Date of birth: Home phone: Cell phone: E-mail: Best way to contact you? Date of this application:

Current College/University:

Major:

Anticipated graduation date and degree earned:

Internship Supervisor's name and contact information:

# What do you hope to achieve as a result of this internship?



Do you plan to obtain supervision towards certification in Applied Behavior Analysis? How many courses have you taken in Applied Behavior Analysis? Have you completed any previous supervised field experience?

Have you ever been convicted of a crime within the last 5 years? If yes, please explain. (It will not necessarily exclude you from consideration).

What age group are you most interested in working with and why?

When do you plan on having your internship begin/end?

How many total hours per day/week do you plan to work?

Please complete the following tentative schedule:



Mon	<u>Tue</u>	Wed	<u>Thu</u>	<u>Fri</u>

Do you have reliable means of transportation? If no, what is your plan to address travel to and from internship site?

Briefly describe your experiences working with children.

Describe your understanding of Autism and related disorders.

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Describe your level of understanding of Applied Behavior Analysis.

Other relevant information that you feel we should be made aware of:



#### The following are required prior to the start of your internship:

- + Official copy of transcript (Undergrad and Graduate if applicable)
- Copies of any supervision forms that will be required by your college or university to be completed by Behavior by Design
- ✤ 2 letters of reference
- Copy of current Act 114 (FBI fingerprint), Act 33 (Child Abuse clearance) through PA Dept of Public Welfare, Act 34 (Criminal background check)
- + Copy of your institution's liability policy for interns

"I certify that the information contained in this application packet is true and to the best of my knowledge. I understand that if accepted into the internship program, any falsified statements shall be grounds for dismissal from the program."

Applicant's signature	
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Date

#### Equal Opportunity Information

Behavior By Design, LLC is an equal opportunity employer which does not discriminate on the basis of race, color, religion/creed, sex, disability, marital status, age, pregnancy, national origin, ancestry, sexual orientation, gender identity and expression, possession of a General Education Development Certificate as compared to a high school diploma, veteran status, or any other characteristic protected by the applicable federal or state laws. This commitment applies to, but is not limited to, decisions made with respect to hiring, placement, compensation, benefits, promotions, demotions, transfers, terminations, layoffs, return from layoffs, administration of benefits, and all other terms and conditions of employment.



# Employee Name: \_\_\_\_\_ Effective Date: \_\_\_\_\_

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
7:00 am	7:00 am	7:00 am	7:00 am	7:00 am	7:00 am	7:00 am
8:00 am	8:00 am	8:00 am	8:00 am	8:00 am	8:00 am	8:00 am
9:00 am	9:00 am	9:00 am	9:00 am	9:00 am	9:00 am	9:00 am
10:00 am	10:00 am	10:00 am	10:00 am	10:00 am	10:00 am	10:00 am
11:00 am	11:00 am	11:00 am	11:00 am	11:00 am	11:00 am	11:00 am
12:00 pm	12:00 pm	12:00 pm	12:00 pm	12:00 pm	12:00 pm	12:00 pm
1:00 pm	1:00 pm	1:00 pm	1:00 pm	1:00 pm	1:00 pm	1:00 pm
2:00 pm	2:00 pm	2:00 pm	2:00 pm	2:00 pm	2:00 pm	2:00 pm
3:00 pm	3:00 pm	3:00 pm	3:00 pm	3:00 pm	3:00 pm	3:00 pm
4:00 pm	4:00 pm	4:00 pm	4:00 pm	4:00 pm	4:00 pm	4:00 pm
5:00 pm	5:00 pm	5:00 pm	5:00 pm	5:00 pm	5:00 pm	5:00 pm
6:00 pm	6:00 pm	6:00 pm	6:00 pm	6:00 pm	6:00 pm	6:00 pm
7:00 pm	7:00 pm	7:00 pm	7:00 pm	7:00 pm	7:00 pm	7:00 pm
8:00 pm	8:00 pm	8:00 pm	8:00 pm	8:00 pm	8:00 pm	8:00 pm
9:00 pm	9:00 pm	9:00 pm	9:00 pm	9:00 pm	9:00 pm	9:00 pm



= Available

= Unavailable (designate client initials, office, travel, etc)

Notes