**Cultural Stipend Internship Program Application**

**Applicant Name:** **Telephone:** **Email:**

**Degree and Year in School:**

**Contact Supervisor:** **Site:** **Hours:**

**List work and school time commitments:**

*Please answer here*

**Are you receiving another Mental Health Services Act stipend?** Yes  No

*Applicants may not be eligible for Cultural Stipend, if receiving a stipend from another source (e.g. Cal SWEC stipend award). Applicants are required to submit this information with application.*

**If yes, please explain:**

*Please answer here*

**Please describe below the ways in which you would add to our systems' efforts to be culturally responsive and humble. Also, please answer the questions completely.**

1. Language skills and level of proficiency: Please specify any languages you speak and your degree of linguistic competence.

*Please answer here*

2. Culture and cultural identities: Please describe the culture(s) you identify with and how your cultural background adds to your abilities and understanding as a clinician or service provider.

*Please answer here*

3. Marginalized population with which you identify and/or have experience: Please describe any marginalized population with which you have personal or professional experience and how this experience adds to your work with clients.

*Please answer here*

4. Special interests and skills: Please identify and describe in detail any special interests and skills that add to your ability to serve clients with cultural humility.

*Please answer here*

5. Previous work example: Please describe in detail a past effort, activity, or project you were involved with, and how you incorporated cultural competency and/or cultural humility into your work.

*Please answer here*

Culturalstipends are awarded in anticipation of awardee's contributions to help BHRS improve its cultural humility and inclusion efforts. If awarded a cultural stipend, the following basic obligations will be required of the awardee.

P**lease initial** below to indicate your agreement to fulfilling these obligations if granted the stipend:

1. \_\_\_\_ Two of awardee's weekly clinic hours will be dedicated to CSIP requirements and obligations including: attending monthly Health Equity Initiative meeting and Final Project development, and other CSIP requirements.
2. \_\_\_\_ Awardees must attend specific cultural stipend-related trainings throughout the year as described by ODE.
3. \_\_\_\_ At the end of the internship, awardees will be expected to complete and present on a cultural humility related project to BHRS staff and the Community Program Specialist.
4. \_\_\_\_ **Stipend awardees are required to attend the mandatory Intern/Trainee Orientation September 8th and 9th 2022 for review of the stipend obligations.** (Information on the orientation meeting will be provided in July. Please save the dates.)

Please **rank your preference,** (with 1 being 1st choice and 4 being last choice) for which Health Equity Initiative (HEI) you are interested in working with throughout the duration of your internship. Interns are required to attend the HEI monthly meeting and do their CSIP Final Project with their HEI.

\_\_\_ African American Community Initiative (2nd Tuesday of each month, 10:30-12n)

\_\_\_ Chinese Health Initiative (1st Friday of each month, 1:30-3pm)

\_\_\_ Native and Indigenous Peoples Initiative (3rd Thursday of each month, 8:30-10am)

\_\_\_ Spirituality Initiative (2nd Tuesday of each month, 12:30-2pm)

To have your application considered, complete this form, and email it to the Office of Diversity and Equity at [ode@smcgov.org](mailto:ode@smcgov.org) **no later than September 14, 2022.**