

Work/Volunteer Experiences

Please complete this chart in as much detail as possible.

Please do not state "see resume."

You may utilize additional charts if necessary.

Agency/Institution	Type of Facility	Dates	Average Hours Per Week <u>OR</u> Total Hours Worked (please specify)	Position/ Title	Ages of Clients (check all that apply)	Types of Diagnosis or Population	Brief Description of Your Responsibilities
<p><i>Example:</i></p> <p>The Children's Hospital, Denver, Co.</p>	<input checked="" type="checkbox"/> Hospital <input type="checkbox"/> Camp <input type="checkbox"/> Preschool/Day Care <input type="checkbox"/> School <input type="checkbox"/> Parks & Rec Dept <input type="checkbox"/> Skilled Nursing Facility <input type="checkbox"/> _____	<p>Jan 2003- March 2004</p>	<input checked="" type="checkbox"/> Average <input type="checkbox"/> Total <p>3 hours per week</p>	<p>Patient Activity Volunteer</p>	<input checked="" type="checkbox"/> Infant/Toddler <input checked="" type="checkbox"/> Preschool <input checked="" type="checkbox"/> School-Age <input checked="" type="checkbox"/> Adolescent <input type="checkbox"/> Adult <input type="checkbox"/> Older Adult	<p>General medical patients and post-surgical patients</p>	<p>Provide developmentally appropriate general recreation activities in the playroom and at patient's bedside.</p>
	<input type="checkbox"/> Hospital <input type="checkbox"/> Camp <input type="checkbox"/> Preschool/Day Care <input type="checkbox"/> School <input type="checkbox"/> Parks & Rec Dept <input type="checkbox"/> Skilled Nursing Facility <input type="checkbox"/> _____		<input type="checkbox"/> Average <input type="checkbox"/> Total		<input type="checkbox"/> Infant/Toddler <input type="checkbox"/> Preschool <input type="checkbox"/> School-Age <input type="checkbox"/> Adolescent <input type="checkbox"/> Adult <input type="checkbox"/> Older Adult		
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