



Reports to: Senior Trauma Therapist  
Senior Family Advocate  
Status: Internship – Unpaid

## FAMILY ADVOCATE INTERNSHIP

### **Position Summary:**

Provides advocacy, crisis intervention, and short-term case management services to child victims of sexual abuse and their families who are referred to the Will County Children's Advocacy Center.

- Conducts a thorough assessment of the child and the non-offending caregiver's mental health and social functioning and makes any referrals necessary to meet identified needs.
- Provides the child and family with education about the investigative process, about their rights, about trauma and the impact of trauma on children and families, and about any other related needs.
- Acts as a liaison for the family with the MDT and also acts as a voice for the family with the team or supports and encourages the family to speak on their own behalf with the team.
- Supports a family throughout a child sexual abuse investigation, intake through disposition.
- Deliver culturally sensitive and well-coordinated care.

### **Essential Functions:**

Review case prior to family arriving at the center to:

- Identify any concerns or needs that the family may have prior to arrival and coordinate/communicate with MDT and other CAC program areas to ensure that the families' needs are met during the visit to the center.
- Determine any specific case issues that may need to be addressed with the family and/or the MDT

Greet child and family upon arrival at the Will County Children's Advocacy Center and help prepare them for the forensic interview and investigation by:

- Explaining the process
- Showing them the interview room
- Explaining their rights, and
- Providing information regarding the MDT members

With the non-offending caregiver, complete the Family Screening Tool that includes a social needs screening of the family and child.

Provide information to the non-offending caregiver regarding trauma and the impact of trauma on children and families.

Provide information to the non-offending caregiver regarding counseling and the benefits of counseling for children who have experienced sexual abuse and other forms of trauma.

Assess the non-offending caregiver's willingness and readiness to participate in and/or ensure his or her child participates in mental health services. Document the information regarding

engagement on the Family Screening Tool.

Provide linkage for the family to mental health services through referrals or by facilitating the child's placement on the centralized wait list.

Serve as families' liaison and representative to the multidisciplinary investigating team.

Assess families for needs and make referrals for families to appropriate social service organizations located in families' communities.

Provide information to the families regarding the Illinois Attorney General's Violent Crime Victims Compensation Program.

Follow up with families after they visit the center to facilitate referrals, answer questions, convey information, and provide on-going case management during child sexual abuse investigations.

Remain in regular and consistent contact with the family during child sexual abuse investigations, including home visits, if necessary.

Attend and participate in regularly scheduled team meetings and case reviews.

Attend and participate in staff development trainings, supervision, peer review, professional development and on-going training activities.

Communicate effectively and function in a collaborative manner within all levels of the organization, with participating agencies and within the community.

Maintain strict confidentiality and cross-cultural awareness in the performance of all duties;

In addition to working with children, Interns may at times offer services to adults with disabilities who receive services from the center.

Bilingual Family Advocate Interns – Provide translation as requested for partner agencies except for translation of legal documents such as safety plans and written statements.

Participate in local networking and training opportunities.

Assist in all CAC fundraising and development efforts as assigned.

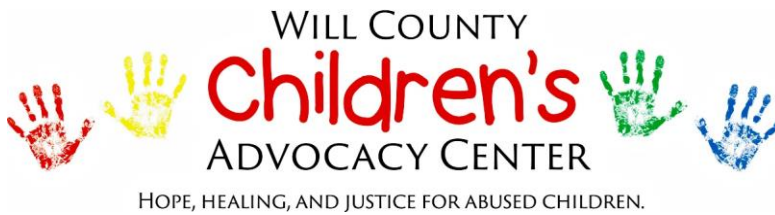
Perform other duties as assigned.

**Discretion:** The Family Advocate Intern has a low-level range of discretion and independent decision-making.

**Relationships:** The Family Advocate Intern works closely with the Family Advocate Coordinator, Forensic Interviewers, contractual mental health providers, and staff from partner agencies.

**Qualifications:** Minimum education requirement of working towards completing a masters in social work and at least 1 year of experience in social services or related field. Strong team building, problem solving, organizational, and oral communication skills are necessary. Demonstrated knowledge of multiple cultures and the cultural impact on the delivery of services a must. Training or experience in working with trauma victims, people with disabilities, and people with mental health disorders preferred. Knowledge of the Will County courts, Will County social service organizations, and victim's rights preferred. Bilingual (Spanish-English) students are strongly encouraged to apply.

**Acknowledgement:** I have read and understand the expectation outlined in my position description:



## Internship Application

### PERSONAL INFORMATION

Name \_\_\_\_\_ Date \_\_\_\_\_

Birth date \_\_\_\_/\_\_\_\_/\_\_\_\_ Social Security Number \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Current Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Permanent Address \_\_\_\_\_ City, State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Languages Spoken:

*Slightly*

*Adequate*

*Frequently*

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### EDUCATION

If accepted for this internship, will this internship count toward academic credit?  Yes  No

Current College/University \_\_\_\_\_

Address \_\_\_\_\_ City, State \_\_\_\_\_ Zip \_\_\_\_\_

Major \_\_\_\_\_ GPA \_\_\_\_\_ Hours \_\_\_\_\_

Expected Date of Graduation \_\_\_\_\_

Previous College University \_\_\_\_\_

Address \_\_\_\_\_ City, State \_\_\_\_\_ Zip \_\_\_\_\_

Major \_\_\_\_\_ GPA \_\_\_\_\_ Hours \_\_\_\_\_

Dates Attended \_\_\_\_\_

Previous College University \_\_\_\_\_

Address \_\_\_\_\_ City, State \_\_\_\_\_ Zip \_\_\_\_\_

Major \_\_\_\_\_ GPA \_\_\_\_\_ Hours \_\_\_\_\_

Dates Attended \_\_\_\_\_

## WORK EXPERIENCE

List information for your three (3) most recent employers. Other relative work experience can be listed elsewhere.

Current Employer \_\_\_\_\_

Address \_\_\_\_\_ City, State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Date of Employment \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

Job Title \_\_\_\_\_ Supervisor \_\_\_\_\_

Duties \_\_\_\_\_

Previous Employer \_\_\_\_\_

Address \_\_\_\_\_ City, State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Date of Employment \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

Job Title \_\_\_\_\_ Supervisor \_\_\_\_\_

Duties \_\_\_\_\_

Previous Employer \_\_\_\_\_

Address \_\_\_\_\_ City, State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Date of Employment \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

Job Title \_\_\_\_\_ Supervisor \_\_\_\_\_

Duties \_\_\_\_\_

## REFERENCES

List two individuals you have known at least two years. Do not list family members.

Name \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Relationship \_\_\_\_\_ How long? \_\_\_\_\_

Name \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Relationship \_\_\_\_\_ How long? \_\_\_\_\_

## AREAS OF INTEREST

Rank your top three (3) areas of interest, 1 being "most interested."

___ Child Care	___ Education	___ Sexual Assault Nurse Examiner
___ Child Protective Services	___ Event Planning/Coordination	___ Social Services
___ Computers/Internet	___ Fundraising	___ Therapy
___ Criminal Law	___ Police Investigation	___ Victim Assistance
___ Criminal Prosecution	___ Public Speaking	___ Other _____

## AVAILABILITY

Semester  Fall  Spring  Summer Year \_\_\_\_\_

List the days (Monday through Friday) and hours (8:00 AM until 5:00 PM) you will be available, as best as you can. Use the space provided below to explain any comments or concerns regarding your schedule.

**\*\* Note: Interns are expected to make a commitment of at least fifteen (15) hours per week and must be available for weekly supervision.\*\***

Monday	Tuesday	Wednesday	Thursday	Friday

## EXPERIENCE SUMMARY

Mark if you have experience and are comfortable using without direction, the following programs:

___ Adobe Acrobat	___ Microsoft Outlook
___ Converting files to PDF	___ Microsoft Publisher
___ Internet Explorer	___ Microsoft Word
___ Microsoft Excel	

Other computer experience \_\_\_\_\_

Explain any experiences you have with each of the following. Attach additional sheets, if necessary.

### Child Protective Services

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**Criminal Justice System**

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**State's Attorney Office**

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**Law Enforcement**

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**Sexual Abuse**

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List all community involvement, professional organizations, including offices held, honors and awards. Include dates. Use the back if necessary.

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## ESSAY QUESTIONS

Answer the following questions.

1. Why do you want to be an intern at the Will County Children's Advocacy Center?

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2. Where do you hope to be in 1 year, 5 years, and 10 years?

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3. What skills do you hope to enhance or learn during your internship?

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4. What is your dream job?

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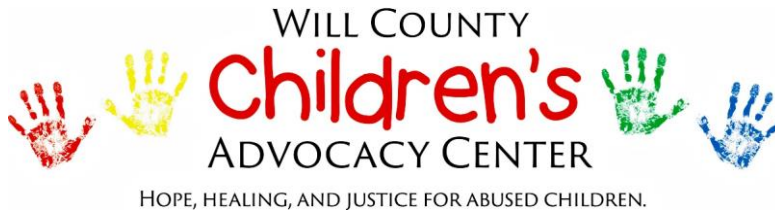
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## Intern Statement

I hereby acknowledge and understand that with the completion of this application, I give my permission to the Will County Children's Advocacy Center and to its authorized agents to use any and all means to verify the information in this application. This includes the accessing of information with regards to criminal history, employment history and other information that may be appropriate to my qualifications regarding the internship program.

(PLEASE INITIAL \_\_\_\_\_)

I further understand that the Will County Children's Advocacy Center has the right to review this application's subsequent information unconditionally, accept or reject my application for internship program placement, and to terminate my internship program placement at any time, and that upon termination, I will return any and all property issued to me by this agency.

(PLEASE INITIAL \_\_\_\_\_)

I understand that I will receive an intern training manual and agree to abide by the policies and procedures set forth in this manual. I also understand that this manual explains the Confidentiality Policy, which specifies that for the protection of all served, every person is prohibited from disclosing the contents of any communications, records, and/or files, except for the purposes directly connected with the administration of the Will County Children's Advocacy Center.

(PLEASE INITIAL \_\_\_\_\_)

APPLICANT FULL NAME (Print) \_\_\_\_\_

SIGNATURE OF APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_



## Intern Agreement

1. I understand and will adhere to the goals and standards of the Will County Children's Advocacy Center.
2. I will attend any orientation, training, or continuing education required for this position.
3. I will treat clients with dignity and respect at all times, and be non-judgmental of clients' values.
4. I will maintain that the client is responsible for all decisions he/she makes.
5. I might listen to, but will never take a position on, issues of religion or politics.
6. I will not give any medical, legal, or psychological advice.
7. I will not share personal information about myself, such as home phone number or address with clients.
8. I will not give clients money or transportation.
9. I will maintain the confidentiality of clients and staff.
10. I will not take a position on issues of birth control, pregnancy, or pregnancy termination with any of the Center's clients.
11. I will not talk with the media about any of the clients or investigative activities of the Center.
12. I will not discriminate for reasons of gender, race, age, sexual preference, or economic status.
13. I will complete all documentation for services provided and volunteer hours worked.

I have read, understand, and agree to abide by the terms set forth in the Will County Children's Advocacy Center Intern Agreement. I understand that violation of these terms is grounds for dismissal from my internship.

SIGNATURE OF APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_