



PACIFICA
GRADUATE INSTITUTE

Counseling PsyD Internship Only Status Request

STUDENT INFORMATION			
Student Name:		Date:	
Telephone:		Track:	LG

APPLICATION INFORMATION		
I, the undersigned, request Internship Only status for the following time period (select <u>one</u> term only):		
Enrollment Type	Term	Year
☐ Internship Only (IO)*	☐ Fall (10/01-12/31)	2026
	☐ Winter (01/01-03/31)	2027
	☐ Spring (04/01-06/30)	2027
	☐ Summer (07/01-09/30)	2027

Student files and financial accounts will be reviewed each quarter for eligibility. A quarterly fee will also apply. A late registration fee will be assessed for forms received by the Registrar's Office after the start of the quarter. IO status is not eligible for financial aid and may affect your student loan repayment schedule.

The Director of Clinical Training must first approve all training sites in writing. Complete and submit this form to the DCT at ndimitrakos@pacifica.edu

***Eligibility Requirements for Internship Status:** Only students who have successfully completed all coursework and passed the Comprehensive Exam may enroll in Internship Only. Additional requirements may apply for eligibility for internship (see Clinical Training Manual).

Required Signatures:

Student _____ Date _____

Director of Clinical Training _____ Date _____

Registrar's Office _____ Date _____

Separation Date _____ PTL Date _____ crswrk, comps, FDA _____

Student Accounts Office _____ Date _____

Billing Applied Yes ☐ No ☐
RO rcvd form _____

Revised 8/2026