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**COMMISSION ON ACCREDITATION  
OFFICE OF PROGRAM CONSULTATION AND ACCREDITATION  
AMERICAN PSYCHOLOGICAL ASSOCIATION**

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**INTERNSHIP: PROGRAM AND ADMISSIONS PREPARATORY FACT SHEET**

**Program Information**

1. Training year start date:\* \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(mm) (dd) (yyyy)

*This should be the actual start date for the training year. The system will automatically calculate and display the training year end date by adding 364 days.)*

2. Has your program experienced any significant changes in financial support during the current training year? \* \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please describe the changes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. URL for Program's website (if applicable): \_\_\_\_\_

**Interns\***

1. Number who applied to program: \_\_\_\_\_

2. Number of interns who were ranked in the APPIC match, overall  
(This number includes all phases of the APPIC match process.): \_\_\_\_\_

3. Number of new interns who were full-time: \_\_\_\_\_

4. Number of new interns who were part-time: \_\_\_\_\_

5. Number of new interns who were funded fully: \_\_\_\_\_

6. Number of new interns who were unfunded or not fully funded: \_\_\_\_\_

7. Number of hours per week required for full time intern: \_\_\_\_\_

8. Minimum stipend for full-time intern (Enter U.S. dollar amount, digits only): \_\_\_\_\_

9. Number hours per week required for part-time intern: \_\_\_\_\_

10. Minimum stipend for part-time intern (Enter U.S. dollar amount, digits only): \_\_\_\_\_

11. Number of hours required to complete program: \_\_\_\_\_

**Supervisors\*** *Classification definitions are located on the Supervisory Data Entry Prep Sheets.*

1. Number of Training Supervisors: \_\_\_\_\_

2. Number of Agency/Institution Supervisors: \_\_\_\_\_

3. Number of Other Contributors: \_\_\_\_\_

\*Item(s) required for data entry.