



Section 1: Applicant Information

Full Legal Name:

Preferred Name (if different):

Preferred Pronouns

(optional): Gender:

Phone Number:

Email Address:

Home Address(Street, City, State, ZIP):

Section 2: Licensure & Credentials

Do you currently hold a professional license that allows you to supervise clinical hours in Tennessee? YES NO

Do you currently hold a professional license or certification in the State of Tennessee? YES ☐ NO

If yes, check all that apply and indicate supervision eligibility:

- ☐ LCSW-S – Licensed Clinical Social Worker, Supervisor Endorsed
- ☐ LPC-MHSP – Licensed Professional Counselor – Mental Health Service Provider
- ☐ LMFT – Licensed Marriage & Family Therapist
 - ☐ AAMFT-Approved Supervisor
 - ☐ TN Board-Approved Clinical Supervisor
- ☐ Other (please specify): _____
 - ☐ Board-approved to supervise clinical hours?
- ☐ Other (please specify): _____

Section 3: Program Fit & Community Alignment

Diversity & Community Engagement Commitment

Mane Up Memphis™ is committed to serving all individuals, regardless of background, identity, or life circumstances. We welcome people of all races, ethnicities, gender identities, sexual orientations, abilities, and socioeconomic statuses.

As a therapist at Mane Up Memphis™, you are expected to actively support our visibility and mission beyond the therapy room. This includes participation in:

- Community events and outreach pop-ups
- Speaking engagements and tabling opportunities
- Mental health awareness efforts in collaboration with local partners

Being part of Mane Up Memphis™ means contributing to a culture of flexibility, service, and community impact. Participation in outreach is a required part of this role.

- ☐ I understand that community engagement is a required part of this role.
- ☐ I am committed to working with individuals and families of diverse backgrounds with empathy and professionalism.

Why do you want to join Mane Up Memphis?

Section 4: Availability & Work Preferences

Work Hours & Availability

Therapists will be required to commit to their submitted availability for a minimum of three (3) months to support consistent scheduling and program delivery. Schedules are assigned based on client demand, team coverage, and therapist availability.

You choose your availability — we align it with client need.

Empower communities while delivering meaningful therapy — on your schedule.

Standard Work Hours:

Monday–Friday:

8:00 AM – 5:00 PM (In-Person and/or Telehealth)

5:00 PM – 5:00 AM (Telehealth Only – After-Hours)

Saturdays:

9:00 AM – 5:00 PM (In-Person and/or Telehealth)

5:00 PM – 9:00 PM (Telehealth Only – After-Hours)

9:00 PM – 5:00 AM: Closed

Sundays: Closed

Note: Scheduling is driven by client demand and therapist availability. After-hours sessions (Monday–Friday after 5:00 PM, and Saturdays after 5:00 PM) are eligible for increased compensation. Final rates will be confirmed during the contracting process.

Select your availability:

- ☐ Monday -Friday, 8:00 AM – 5:00 PM (In-Person and/or Telehealth)
- ☐ Monday -Friday, 5:00 PM – 5:00 AM (Telehealth Only – After-Hours)
- ☐ Saturday, 9:00 AM – 5:00 PM (In-Person and/or Telehealth)
- ☐ Saturday, 5:00 PM – 9:00 PM (Telehealth Only – After-Hours)

☐ I understand that my selected availability is locked in for a 3-month period.

☐ I am open to consideration for similar roles, if available.

Section 5: Scenario Response

Scenario:

You're working with a 17-year-old client experiencing increased anxiety related to school performance and family expectations. During your third session, they say, "I don't think therapy is helping — nothing has changed."

What is your most likely next step? (Select the option that best reflects your clinical approach.)

- ☐ A. Validate their feelings and ask them to reflect on any subtle shifts or insights they may not have noticed yet.
- ☐ B. Acknowledge their concern and explore whether the treatment goals or approach need to be adjusted.
- ☐ C. Gently challenge their assumption and review therapeutic progress collaboratively, using tools or metrics if available.
- ☐ D. Normalize doubts about therapy and re-engage them in identifying what they need most from the space.
- ☐ E. Pause the session plan and invite them to guide the direction of that day's session to regain autonomy

Section 6: Experience Summary

Do you have 2+ years of experience in providing individual, group, or family therapy? ☐ Yes ☐ No

Have you facilitated workshops or psychoeducational groups in community or clinical settings? ☐ Yes ☐ No

Have you worked in trauma-informed and culturally responsive environments? ☐ Yes ☐ No

List the types of populations and age groups you've served :

(e.g., youth, families, justice-involved, women, etc.)

Section 7: Acknowledgments

☐ I understand that this is a 1099 contract position with no guaranteed minimum hours or income. Compensation is only provided for approved hours worked when clients, programs, or deliverables exist.

☐ I acknowledge that this is a "work-as-needed" position, and I will not be compensated for standby, availability, or administrative prep not assigned by Mane Up Memphis™.

☐ I understand that maintaining professional liability insurance is strongly recommended, and I agree to submit proof of coverage if a policy is held or acquired during the contract term.

