



CCBirthCenter.com

CORPUS CHRISTI BIRTH CENTER

939 Ayers Street, Corpus Christi, TX 78404
Phone 361.883.BABY (883.2229) or FAX 361.336.0212

Clinical Director:
Beth Overton, CPM

Apprenticeship Application Form

We desire to find students who will most likely be a good fit for our practice. Filling out this application is not a commitment to accept an apprenticeship if one is offered. By taking the time to answer these questions, it usually saves lots of time in the long run because it helps us find the students who might fit our practice the best. If we do decide that you might be a good fit for our practice, we will contact you and offer you a possible apprenticeship agreement, but you will be under no obligation until you agree to an offer.

Completed applications may be FAXED to 361.336.0212

Or sent by e-mail to beth.overton@ccbirthcenter.com (please put "Apprenticeship Application" in the subject header)

Name _____ Date of Birth _____

Address _____

Preferred Phone _____ Alternate Phone _____

Is your preferred phone a cell? _____ Can you receive text messages? _____

Marital Status _____ Children's ages _____

Please answer the following questions. Please note that the only "right" answer to the following questions is a truthful and honest one. So please be as open, honest and thorough as you can when answering each of the questions. Please include a recent photo of yourself and at least two personal references along with the completed application form. If you have ever worked with or shadowed another midwife (midwives), please include her name(s) and contact information.

1. Why do you want to become a midwife?
2. How did you hear about Corpus Christi Birth Center? Why are you interested in us?
3. What is your educational background?
4. Are you currently enrolled in a midwifery academic program? Do you plan to enroll in an academic program? Which one? If not, what are your plans?

5. Have you had any experiences working with pregnant or birthing women? Please elaborate.
6. Do you have any physical limitations, family responsibilities or other responsibilities that might limit your availability or availability as an apprentice?
7. Please describe how you handle stress in your life. Give an example.
8. Tell us about your plans for midwifery, including where you would like to practice.
9. Are you fluent in any other language(s) besides English?
10. Will you always have a dependable car and a reliable cell phone available?
11. Please indicate on a scale of 1-10 where you would consider yourself as an extrovert or an introvert using 1 as an extreme introvert and 10 as an extreme extrovert (*no right or wrong answer, we just want to know how you see yourself*).
12. What was your placement within your own family? Among siblings, were you the oldest, youngest, middle or an only child? Or perhaps your situation was unique. Please tell us.
13. Do you have the financial resources available to you to cover the costs of your training and the ability to live without a regular paycheck for the duration of your stay with us?
14. Tell me about your family. (i.e., partner, spouse, children, grandchildren)
15. What spiritual orientation do you have (if any)? Please share with us how your spiritual beliefs might affect your work as a student or a midwife? Are you restricted from working on certain days or working with certain people? Would you who consider yourself compatible working with Christian people who have a Biblical world view or would that be an adjustment for you?

16. What are be your needs and/or expectations for scheduled time off?
17. Do you use any social (recreational) drugs, alcohol, cigarettes, or prescription medications?
18. If you personally get a cold, have a headache or a stomach virus, how do you deal with it?
19. What contributions do you see yourself making to the birth center during your apprenticeship? How will you be an asset to the birth center and the midwives during your time as an apprentice?
20. Describe the qualities you like best about yourself.
21. What do you feel are your weaknesses?
22. Do you have any skills you would like for us to know about, such as computer skills, typing, teaching, cleaning, organizing, etc.?
23. What are your hobbies?
24. If you have ever begun an apprenticeship with someone else, who was (were) your preceptor(s) and why didn't you complete the apprenticeship?
25. If you are accepted as an apprentice, will you be able to provide your own housing?
26. CCBC offers short term and long-term agreements up to one year at a time. Some apprentices complete all their training with us by renewing terms with us until they complete. How long of an apprenticeship agreement are you seeking with this application?

27. Do you have any children still living at home? What are their ages? Do you have arrangements made for their care while you are working or attending a birth?
28. If you are married or in any other serious relationship, please tell me how that person feels about your decision to become a midwife. Are they supportive, reluctant, or just don't care either way? (Please take your time and answer this question thoroughly.)
29. Please tell us what you think about "Right to Life" vs "Pro-Choice." Where do you stand on this issue? How would you deal with patients who have a history of abortion in their past?
30. Have you formed an opinion about infant circumcision? You don't have to have an opinion, but please explain if you have one.
31. Have you formed an opinion about vaccinations? You do not have to have an opinion, but please explain if you have one.
32. Do you have any other strongly held beliefs that you would like for us to consider to determine whether or not CCBC would be a good fit for you?

Please send a photo of yourself and at least two references from former preceptors, midwives, or employees.

If you have any questions, please call one the numbers listed on the front of this form.

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