

Internship Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Date Available: _____ Social Security No.: _____ Birthday: _____

Desired Internship: _____

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Do you have a valid driver's license?

Driver's license state, number _____

Have you ever worked for this company? YES NO If yes, when? _____

Have you ever been convicted of a felony? YES NO

If yes, explain: _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

References

Please list three professional references.

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Previous Employment

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____
Address: _____ Supervisor: _____

Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge, and I grant permission to confirm the information supplied on this application by me. I understand that any false statements, misrepresentations, or omissions made by me orally or in this application, or any other documents in connection with my application, may be grounds for denial of internship or dismissal from internship, regardless of when and how discovered.

I understand that if an offer of an internship is made, I will be subject to a comprehensive background check.

I acknowledge that it is the policy of the Alford Youth & Community Center to provide equal employment opportunities to all applicants without regard to race, color, gender, physical or mental disability, religion, age, national origin, or other legally protected status.

Signature: _____ Date: _____

Why the AYCC?

Why are you interested in an internship with the Alford Youth and Community Center?

What field do you ultimately wish to build a career in?

How do you see this internship fitting into your long-term career goals?

If selected for an internship, what skills or professional development do you hope to gain during your time at the AYCC?

How did you hear about this internship?

Please list any other relevant certifications or experience.