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# Internship Application

## Applicant Information

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| --- | --- | --- | --- | --- | --- |
| Full Name: |  |  |  | Date: |  |
|  | Last | First | M.I. |  |  |

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| --- | --- | --- |
| Mailing Address: |  |  |
|  | Street Address | Apartment/Unit # |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  | City | State | ZIP Code |

|  |  |  |  |
| --- | --- | --- | --- |
| Phone: |  | Email |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Internship Position Applied for:  (Interns may only apply for one position) | Developmental Team  Community Outreach Associate  Grant Writer  Fundraising Coordinator  Office Assistant  Leader  Early Childhood Education Teacher  Emergency Management Instructor  Health & Safety Instructor  Water Safety Instructor (Summer Only) | YES  **☐**  **☐**  **☐**  **☐**  **☐**  **☐**  **☐**  **☐** |  |

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

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 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

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| --- | --- | --- | --- |
| High School: |  | Address: |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| From: |  | To: |  | Did you graduate? | YES  ☐ | NO  ☐ | Diploma:: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| College: | **Lamar University** | Degree: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Department Head or Professor (for this internship): |  | Contact Phone Number *AND* Email Address: |  |

## 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  ☐ |  |
|  |  |  |  |
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|  |  |  |  |
| --- | --- | --- | --- |
| 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.*

*If this application leads to an internship, I understand that false or misleading information in my application or interview may result in my release.*

|  |  |  |  |
| --- | --- | --- | --- |
| Signature: |  | Date: |  |

**Please complete the following internship application question honestly: Why do you want to intern for the Lewis Educational And Recreational Nonprofit?**

**LEAVE THIS SPACE BLANK FOR OFFICE USE ONLY – Interview Notes**

Date of Interview: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Interviewed By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_