



## INTERN APPLICATION

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Gender: M F

Address-City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone-Cell: \_\_\_\_\_ Phone-Home: \_\_\_\_\_

Email address: \_\_\_\_\_

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School: \_\_\_\_\_ Program: Undergraduate OR Graduate

Professor/Supervisor Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Major: \_\_\_\_\_

Internship Course/Department: \_\_\_\_\_

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### **EDUCATION:**

High School: \_\_\_\_\_ City, State: \_\_\_\_\_

Did you graduate? Yes (year \_\_\_\_\_) OR No

College: \_\_\_\_\_ City, State: \_\_\_\_\_

Dates-From: \_\_\_\_\_ To: \_\_\_\_\_

Did you graduate? Yes (year \_\_\_\_\_) Degree: \_\_\_\_\_ OR No

Other College: \_\_\_\_\_ City, State: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Did you graduate? Yes (year \_\_\_\_\_) Degree: \_\_\_\_\_ OR No

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**CURRENT/PREVIOUS EMPLOYMENT:**

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

City, State: \_\_\_\_\_ Dates-From: \_\_\_\_\_ To: \_\_\_\_\_

Job Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Reason for leaving:

May we contact your current/previous supervisor for a reference? Yes OR No

**Company #2:** \_\_\_\_\_ Phone: \_\_\_\_\_

City, State: \_\_\_\_\_ Dates-From: \_\_\_\_\_ To: \_\_\_\_\_

Job Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Reason for leaving:

May we contact your current/previous supervisor for a reference? Yes OR No

What do you know about The CARE House?

Why are you interested in securing a volunteer/internship position with The CARE House?

What characteristics do you possess that would be beneficial to the organization?

**Thank you for considering an internship position at The CARE House!**

*Disclaimer/Signature: I certify that my answers, on this application, are true and complete to the best of my knowledge. If this application leads to internship/volunteer work, I understand that false or misleading information could result in termination.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_