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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.: |  |

|  |  |
| --- | --- |
| Position Applied for: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Are you a citizen of the United States or an alien authorized to work in the U.S.? | YES | NO | Are you 18 years old or older? | YES | NO |

|  |  |  |  |
| --- | --- | --- | --- |
| 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: |  |

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Expected Graduation Date (if applicable)

Cumulative G.P.A.

|  |  |  |  |
| --- | --- | --- | --- |
| Other: |  | Address: |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| From: |  | To: |  | Did you graduate? | YES | NO | Degree: |  |

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Expected Graduation Date (if applicable)

Cumulative G.P.A.

References

Please list three professional references.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Full Name: |  | Relationship: | |  |
| Company: |  | Phone: | |  |
| Address: |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
| Full Name: |  | Relationship: | |  |
| Company: |  | Phone: | |  |
| Address: |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
| Full Name: |  | Relationship: | |  |
| Company: |  | Phone: | |  |
| Address: |  | |  |  |
|  |  |  | |  |

Additional Documentation Needed

Attached with this application, please include your updated resume, one professional letter of recommendation, a copy of your college transcript, and the completed questionnaire.

## Disclaimer and Signature

I certify that my answers are accurate and complete to the best of my knowledge.

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

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