

APPLICATION FOR INTERNSHIP

Employment Experience

Start with your present or most recent job.

1.

| | | | |
|-----------------------------|---------------------------------------|---------------------------------------|---|
| Employer | Dates Employed | | Work Performed |
| Address | From: Mth/Day/Yr | To: Mth/Day/Yr | |
| | Hourly Rate/Salary | | |
| Phone Number(s) | Starting | Final | |
| Job Title | | | |
| Supervisor's name and title | Full-Time <input type="checkbox"/> | Part-Time <input type="checkbox"/> | |
| Reason for Leaving | | | May we contact this employer for a reference? Yes <input type="checkbox"/> No <input type="checkbox"/> |

2.

| | | | |
|-----------------------------|---------------------------------------|---------------------------------------|---|
| Employer | Dates Employed | | Work Performed |
| Address | From: Mth/Day/Yr | To: Mth/Day/Yr | |
| | Hourly Rate/Salary | | |
| Phone Number(s) | Starting | Final | |
| Job Title | | | |
| Supervisor's name and title | Full-Time <input type="checkbox"/> | Part-Time <input type="checkbox"/> | |
| Reason for Leaving | | | May we contact this employer for a reference? Yes <input type="checkbox"/> No <input type="checkbox"/> |

3.

| | | | |
|-----------------------------|---------------------------------------|---------------------------------------|---|
| Employer | Dates Employed | | Work Performed |
| Address | From: Mth/Day/Yr | To: Mth/Day/Yr | |
| | Hourly Rate/Salary | | |
| Phone Number(s) | Starting | Final | |
| Job Title | | | |
| Supervisor's name and title | Full-Time <input type="checkbox"/> | Part-Time <input type="checkbox"/> | |
| Reason for Leaving | | | May we contact this employer for a reference? Yes <input type="checkbox"/> No <input type="checkbox"/> |

4.

| | | | |
|-----------------------------|---------------------------------------|---------------------------------------|---|
| Employer | Dates Employed | | Work Performed |
| Address | From: Mth/Day/Yr | To: Mth/Day/Yr | |
| | Hourly Rate/Salary | | |
| Phone Number(s) | Starting | Final | |
| Job Title | | | |
| Supervisor's name and title | Full-Time <input type="checkbox"/> | Part-Time <input type="checkbox"/> | |
| Reason for Leaving | | | May we contact this employer for a reference? Yes <input type="checkbox"/> No <input type="checkbox"/> |

If you need additional space, please continue on a separate sheet of paper.

Office Skills

(Where applicable, specify software or system)

- | | |
|--|--|
| <input type="checkbox"/> Word processing _____ | <input type="checkbox"/> Multi-line phones/reception _____ |
| <input type="checkbox"/> Spreadsheet _____ | <input type="checkbox"/> Bookkeeping _____ |
| <input type="checkbox"/> Database _____ | <input type="checkbox"/> Other _____ |

Special Skills and Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience that you feel would be helpful to us in evaluating your ability to perform in this position.

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Do you speak a language in addition to English? Yes ☐ No ☐ Please specify: _____

Volunteer Experience/Activities

You may exclude activities that disclose the race, color, national origin, sex, age, religion, marital status, sexual orientation, veteran status, or disabilities of organization members.

| Organization | From | To | Duties & Responsibilities |
|--------------|------|----|---------------------------|
| | | | |
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| | | | |

References

List three work references who are not related to you. **Please include their addresses and/or phone numbers.**

| Name | Company | Contact (Phone & Email) | Relationship |
|------|---------|-------------------------|--------------|
| 1. | | Phone: E-mail: | |
| 2. | | Phone: E-mail: | |
| 3. | | Phone: E-mail: | |

1. Are you presently employed? Yes ☐ No ☐
2. Do you have any responsibilities, obligations, activities or commitments that would prevent you from meeting the work schedule or attendance requirements of this job? Yes ☐ No ☐ If yes, please explain _____

3. Have you ever filed an application with us before? Yes ☐ No ☐ If yes, give date(s) _____
4. Are you or have you ever been employed with us before? Yes ☐ (if yes, answer questions 5,6,7) Give date(s) _____ No ☐
 5. Were you consistently (12 months) on time with your billing? Yes ☐ No ☐
 6. Did you consistently meet your production standards (12 months)? Yes ☐ No ☐
 7. Did you receive "meets or exceeds" ratings on your Performance Reviews? Yes ☐ No ☐
8. Have you ever volunteered or interned with us before? Yes ☐ No ☐ If yes, give date(s) _____
9. Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? (Proof of citizenship or immigration status will be required upon employment) Yes ☐ No ☐
10. On what date would you be available to begin as an intern? _____
11. Are you able to perform the essential functions of the internship for which you are applying? Yes ☐ No ☐
12. Have you been convicted of a crime or been released from prison within the last seven (7) years for an offense involving dishonesty or breach of trust? (A "yes" answer will not necessarily bar you from employment.) Yes ☐ No ☐
If yes please explain _____

U.S. Military Service

| Branch of Service | Date In | Date Out | Where Served | Specialty |
|-------------------|---------|----------|--------------|-----------|
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Additional Comments

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I certify that the information given by me to Community Intervention Associates (CIA) is true and complete to the best of my knowledge. I understand that, if employed, false or misleading information may result in immediate dismissal.

I further certify that I am not engaged in any outside activity or business that could be considered in conflict with CIA interests or those of its clients nor will I become engaged in such activity or business if employed.

I authorize CIA to solicit information regarding previous employment, and similar background information, and to contact any and all references I have given on my application. I hereby release all parties and persons connected with any such request for information from all claims, liabilities, and damages for any reason arising out of the furnishing of such information. If employed, I release CIA from any liability for future references it may provide regarding my work history at the agency.

Signature _____ Date _____