

GO GREENVILLE SUMMER INTERNSHIP PROGRAM City of Greenville, MS

In order to be considered for an internship, you must submit a signed and completed application form along with a cover letter and your resume. All application items must be submitted as a complete package. Incomplete applications will not be reviewed. Please refer to the program description for an overview of the program and a listing of important dates.

		Applicant In	formation							
Full Names					Data					
Full Name:	Last	First		M.I.	Date:					
Address:										
	Street Address			Apar	tment/Unit #					
	City			State	e ZIP	Code				
Phone: ()	E-mail YES NO								
Are you a ci	ork in the U.S.?	YES NO								
Are you requesting that your college grant you credit hours for your internship?										
Education										
High School	:	City/State:	YES NO)						
From:	To:	Did you graduate?								
College:		City/State:								
From:	To:	Did you graduate?	YES NO							
Scholastic H	lonors and/or Licenses									
Community/	nrofessional organization	ons honors and awards:								
Community/professional organizations, honors and awards:										
Activities relevant to the internship(s) for which you are applying										
		Previous Em	ployment							
Previous Employment										
		Includes paid, volunteer,	and intern p	positions.						
Company:				Phone:	()					
Address:			Supervisor:							

Job Title:							
Responsibilities:							
From:	To:	Reason for L	eaving:				
May we contact your p	revious supervisor for a	a reference?	YES	NO			
Company:					Phone:	()
Address:				(Supervisor:		
Job Title:							
Responsibilities:							
From:	To:	Reason for L	eaving:				
May we contact your p	revious supervisor for a	a reference?	YES	NO			
Company:					Phone:	()
Address:				(Supervisor:		
Job Title:							
Responsibilities:							
From:	To:	Reason for L					
May we contact your p	revious supervisor for a	a reference?	YES	NO			
			erences	,			
Please list three professional references.							
Full Name:			Relationsl	nip:			
Company:					Phone:	()
Address:							
Full Name:			Relationsl	nip:			
Company:					Phone:	()
Address:							
Full Name:			Relationsl	nip:			
Company:					Phone:	()
Address:							

Short Answer
Why would you like to intern as part of the Go Greenville program?
Interns will be placed in a business or organization that closely matches his/her area of study in college. Example areas for placement may include: banks, real estate companies, law firms, city and county government agencies, health care organizations, non-profit organizations and others.
With which type of organization would you like to be placed and why?
Disclaimer and Signature
I certify that my answers are true and complete to the best of my knowledge.
If this application leads to acceptance in the Go Greenville Summer Internship Program, I understand that false or misleading information in my application or interview may result in my release.
Signature: Date:
Please mail this application, your resume and a copy of your transcript to the following address:
City Hall, Mayor's Office
Attn: Go Greenville Summer Internship Program
P.O. Box 897 Greenville, MS 38702

DEADLINE TO APPLY IS: MARCH 30, 2012