



**Department of Intercollegiate Athletics, University of Minnesota-Twin Cities**

**Internship Application**

If you are interested in applying to one or more of our internships listed below, submit this form along with a separate document to include a cover letter, current resume and names and contact information of three references to [icahr@umn.edu](mailto:icahr@umn.edu).

PLEASE, complete the application and indicate below which internship(s) for which you would like to be considered. You only need to submit one internship application and materials.

First Name \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Country \_\_\_\_\_

Primary Contact Number \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Are you a University of Minnesota-Twin Cities Student-Athlete? ☐ YES ☐ NO

Will you have an undergraduate degree by June 1, 2014? ☐ YES ☐ NO

*\* Background check required on all internships.*

For more information on Gopher Sports at the University of Minnesota Athletics go to our webpage at <http://www.gophersports.com>. The required and preferred qualifications and a description of each Internship is posted under inside athletics/employment. We will continue to accept applications until the internships are filled.

**2014-2015 Internship Opportunities**

\_\_\_\_\_ Administration

\_\_\_\_\_ Creative Services

\_\_\_\_\_ Facilities: Mariucci and Ridder  
Arenas

\_\_\_\_\_ Facilities: Williams Arena/Sports  
Pavilion

\_\_\_\_\_ GGF: Athletic Development Major  
Gifts

\_\_\_\_\_ GGF: Events, Hospitality &  
Premium Services

\_\_\_\_\_ M Club

\_\_\_\_\_ Motion Graphics

\_\_\_\_\_ Ticket Office

\_\_\_\_\_ Video/Production (New Media)

\_\_\_\_\_ **GGF- Annual Fund Intern -Annual Giving Program** (added on 5/8/14)

The UNIVERSITY OF MINNESOTA is committed to the policy that all persons shall have equal access to its programs, facilities and employment without regard to race, color, creed, religion, national origin, sex, age, marital status, disability, public assistance status, veteran status or sexual orientation.

## CONFIDENTIAL APPLICANT INFORMATION FORM

Please complete this information to assist us in complying with equal opportunity/affirmative action recordkeeping and reporting requirements. Providing this information is voluntary; and refusal to provide it will not result in any adverse treatment. This form will be kept in a separate, confidential file and will be used only for government reporting purposes.

**Gender:**    ☐ Male    ☐ Female

**Race/ Ethnic Group** (*select one only*)

1. Ethnicity: Are you Hispanic or Latino?   ☐ Yes    ☐ No

2. Race: please check any or all that apply:

- ☐ American Indian or Alaska Native
- ☐ Asian
- ☐ Black or African American
- ☐ Native Hawaiian or Other Pacific Islander
- ☐ White

### **Ethic Definitions**

**Hispanic or Latino:** A person of Cuban, Mexican, Puerto Rican, South or Central America, or other Spanish culture or origin, regardless of race.

### **Racial Definitions**

**American Indian or Alaska Native:** A person having origins in any of the original peoples of North and South America (including Central America), and who maintains a tribal or community attachment.

**Asian:** A person having origins in any of the original people of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine, Islands, Thailand and Vietnam.

**Black or African American:** A person having origins in any of the Black racial groups of Africa.

**Native Hawaiian or Other Pacific Islander:** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or Pacific Islands.

**White:** A person having origins in any of the original peoples of Europe, the Middle East or North Africa.