

NATIONAL SPORTS CENTER FOR THE DISABLED

PO Box 1290 - 33 Parsenn Road

Winter Park, CO 80482

1801 Mile High Stadium Cir. Ste 1500 Denver CO 80204

www.nscd.org

APPLICATION FOR INTERNSHIP

Thank you so much for your interest in an internship with the NSCD.

Please respond to the following question in conjunction with your application.

Is this internship required by the University based program you are currently enrolled in?	yes 🗖	no🗖
Can you provide the specific requirements by your college or university for this internship?	yes 🗖	no🗖

Each question should be completely and accurately answered. Use blank paper if you do not have enough room on this application. PLEASE PRINT NEATLY except for your signature. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon non-job related information.

Equal Employment Opportunity (EEO) Policy

NSCD is dedicated to the principles of equal employment opportunity. We prohibit unlawful discrimination against applicants or employees on the basis of age 40 and over, race, sex, color, creed, religion, national origin, disability, sexual orientation, ancestry, citizenship, veteran status, genetic information, or any other applicable status protected by state or local law.

NCSD is committed to a drug free work place.

Please list in order of preference job(s) applied for: ______ Today's Date______

I am available to start

PERSONAL INFORMATION

Last Name	First Name	Middle Initial	Telephone Nu	mber	Email Address	
Present Mailing Addro	ess		City	State	Zip Code	
Are you 18 years of age or	older?]Yes □ No				
If hired, can you furnish p	roof you are eligible	to work in the U.S.?	? 🗆 Yes	🗆 No		
Were you ever employed	here? 🗆 Yes	□ No	If yes, when?			
Have you ever been convi	cted of any law viol	ation (except a parki	ing ticket?) 🛛 Yes	🗆 No		
If yes, give details (A "yes" answer does not autom	atically disqualify you fro	m employment, since the	e nature of the offense, d	ate and the job for whi	ch you are applying will also l	be considered
Do you have a valid driver	's license? 🛛 Ye	s 🗆 No 🤅 Stat	e of Issue:			
Have you had yo	our driver's license s	uspended or revoke	d in the last 3 years?	? 🗆 Yes 🗆 I	No	
If yes, give details						

Of what clubs, organizations, civic or other groups have you been a member in the last five years? (List offices held.) **Exclude any labor** organizations or any organizations of which the name and character indicate race, color, religion, sex, age, national origin or ancestry of its members.

EDUCATION

LIST NAME AND ADDRESS OF SCHOOLS	Date Completed	Degree/Diplo Certificate	oma		
High School or GED					
College or University					
Subjects Studied					
Vocational or Technical					
What skills or additional training do you have that are related to the job for which you are applying?					
What machines or equipment can you operate that are related to the job for which you are a	applying?				
Indicate any foreign language(s) you speak	Fluently	Good	Fair		

PREVIOUS EMPLOYMENT

List names of employers in consecutive order with present or last employer listed first. Account for all periods of time including second jobs, military service and any period of unemployment. If self-employed, give firm name and supply business references.

Company Name and Address	Dates	Name of Supervisor & Phone Number	Job Title/Duties	Last Salary	Reason for Leaving
	From:				
	To:				
	From:				
	To:				
	From:				
	To:				
	From:				
	To:				

Is there information relative to change of name, nicknames, or assumed names that we may need to check your work past record?

May we contact your present employer? Have you ever been fired from a job or asked to resign? \Box Yes \Box No

🗆 Yes 🗆 No

Explain: If yes, please explain _____

PERSONAL REFERENCES					
Give three personal references, not to include relatives or former employers.					
Name	Address	Phone	Occupation		
How were you referred to us?	, (Please provide employe	e's full name if you were refer:	rred by a current Winter Park employee.)		

PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING

I certify that all information provided in this internship application is true and complete. I understand that any false information or omission may disgualify me from further consideration for an internship and may justify my dismissal if discovered at a later date.

I understand that the employer may request an investigative consumer report from a consumer reporting agency. This report may include information as to my character, reputation, personal characteristics and mode of living obtained from interviews with neighbors, friends, former employers, schools and others. I understand I have a right to make a written request within a reasonable time for the disclosure of the name and address of the consumer reporting agency so that I may obtain a complete disclosure of the nature and scope of the investigation.

I authorize the investigation of any or all statements contained in this application and also authorize any person, school, current employer (except as previously noted), past employers and organizations named in this application to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

I understand that if I am extended an offer of an internship it may be conditioned upon my successfully passing a complete pre-internship physical examination. I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the work for which I am applying.

I understand I may be required to successfully pass a drug screening examination. I hereby consent to pre or post employment and random drug screening.

I UNDERSTAND THAT THIS APPLICATION OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE A CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT CAUSE AND WITH OR WITHOUT NOTICE.

I have read, understand, and by my signature consent to these statements.

Signature

Date ____

This application for an internship will remain on file 6 months. Ask a NSCD Human Resources representative for details.