



# SOUTHERN BOONE AREA YMCA - COLLEGE INTERNSHIP APPLICATION

Seeking internship for the following semester (check one):      Spring      Summer      Fall

First Name: \_\_\_\_\_ Street Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Last Name: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_ Email: \_\_\_\_\_

College/University: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Major/Minor: \_\_\_\_\_ GPA: \_\_\_\_\_

I am seeking an internship for class credit. (Check one)      NO      YES      I need \_\_\_\_\_ number of hours for credit.

If yes, I will be/I am enrolled to receive course credit for my internship through:

Course Name: \_\_\_\_\_ Course Supervisor: \_\_\_\_\_ Supervisor Phone: \_\_\_\_\_

Please let us know the dates/times you are available below. Be sure to include AM/PM.

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
FROM							
TO							

I have a strong interest in the following areas/departments:

- Non-profit Business Operations     Fundraising     Marketing & Membership  
 Child Care Development     Health, Wellness, Fitness     Sports

Please give a brief description of your course of studies to date. Add additional page if necessary.

What do you want to learn with this internship?

What current skills do you have that would assist with a great internship (program experience, computer skills, volunteer experience, qualifications/certifications)

How did you learn of this opportunity?

Have you ever been convicted or plead guilty to a criminal offense? (Check One)      NO      YES If yes, what was it? \_\_\_\_\_

**It is understood that Southern Boone Area YMCA internships are unpaid opportunities, but have the opportunity for possible employment following the internship. All offers are subject to applicant passing a criminal records check and child abuse screening. Students will be considered for placement without regard to race, ethnic origin, gender, age, religious or political persuasion, or sexual preference.**

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date