

APPLICATION TO INTERN

NAME (first/middle/last)	Date:
Street Address:	email:
City/State/Zip	Cell phone:
Virginia State Driver's License Number	Date of Birth

Time Frame (please circle appropriate): Summer Winter Fall Semester Spring Semester

Area of Interning _____

Available Start Date _____ **End Date** _____

General Availability

1. Check the box for the time period(s) in the day(s) you're available.
2. Indicate the hours on the given day you would volunteer

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

Are there any physical conditions to be taken into consideration in arranging volunteer assignments for you? Yes No
If "Yes", please explain:

Emergency Information

In case of emergency, contact:

Name:	Relationship:
Work Phone:	Home Phone:

Skills and Interests

Current/Previous work or occupation:	
Previous Volunteer experience:	What?
	Where?
Hobbies, interest, skills:	
Special training, certification?	
Additional Resources (website, online portfolio, etc)	

Education

Circle highest grade completed?

College	1	2	3	4	Degree:
Grad School	1	2	3	4	Degree:

References

List two personal references, other than family members (full name, address, phone);

NAME (first/middle/last)	phone:
Street Address:	City/State/Zip:

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Do you have any criminal convictions (other than parking violations and/or juvenile offenses)?	Yes
	No
If "Yes", please explain where, when and disposition:	
(Convictions will not automatically bar you from volunteering. Relevance to assignment will be considered)	

I understand that I am not an employee of the City of Newport News, and that any duties that I perform are as a volunteer. I agree to abide by the procedures set by the Downing-Gross Cultural Arts Center for my assigned work duties. I also understand that it is my responsibility to update any address, emergency and other changes to the information on this form.

By my signature, I authorize the City of Newport News (Downing-Gross Cultural Arts Center) to conduct a background check of my driving record and criminal record.

Signature:	Date:
Parent/Guardian (if under 18 years of age):	