

Date	e of Application:
	Seasonal Winter Park- Winter
	Seasonal Winter Park-Summer
	Seasonal Denver-Summer
	Seasonal Denver-Winter

## **APPLICATION FOR INTERNSHIP** WE ARE AN EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER

Each inquiry on this application must be <u>fully answered</u> or <u>completed</u>. Otherwise, you will not be considered for an internship.

APPLICANT	CONTACT	INFORMATION
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APPLICANT CONTACT INFORMATION				
Last Name	First Name	Middle Name	E-Mail Address	
Current Address		Primary Phone Num	ber	
Street and Number City, State, Zip				
Can you provide the specific re	equirements by your college or u	niversity for this internship? 🗆 Y	YES □ NO	
Can you provide proof of insu	rance by your college or universit	y for this internship? 🗆 YES 🗆	NO	
Are you looking at this interns	hip to fulfill your CTRS requireme	ents?   YES   NO		

## **CURRENT AND PREVIOUS EMPLOYMENT**

Please list the names of your present and previous employers in chronological order with PRESENT or most recent employer listed first for all employment you have held in the last five years.

Employer 1		Work Performed		
Phone Number		1		
Thome Number				
Address		Were you ever disciplined? If yes, please explain.		
Job Title	Supervisor Name & Title	Reason for Leaving		
Dates Employed		Additional Information		
From: To	):			
Employer 2		Work Performed		
Phone Number				
Address		Were you ever disciplined? If yes, please explain.		
Job Title	Supervisor Name & Title	Reason for Leaving		
Datas Francisco		Additional Information		
Dates Employed		Additional Information		
From: To	:			
Have you ever been terminated, resigned in lieu of termination, or asked to resign from any job? ☐ YES ☐ NO				
If yes, please explain circumstances (use a separate sheet of paper if necessary):				
May we contact your current employer?   YES   NO If no, please explain:				

## **EDUCATION AND TRAINING**

	Name and Address of School	Course of Study	No. of Years Completed	Diploma/Degree
High School				
Undergraduate Degree				

Ī	Graduate/Professional					
	Other (Specify)					
	Indicate any foreign langua	age(s) you speak:	Fluently	Good Fa	ir	
apı	plying? or example, CPR/First Aid, PS	or credentials (list current with date attained	,		-	
Wh	nat machines or equipment o	can you operate that are related to the intern	ship for which you are	applying?		
ΑD	DITIONAL APPLICANT DET	AILS				
1.	Have you ever worked for or completed an internship with NSCD or Winter Park Resort?   VES NO If yes, please give dates, position and location:					
2.	Do you have any friends or relatives working for the NSCD?   YES NO  If yes, name(s), relationship and location:					
3.	Are you 18 years of age or					
4.	Do you have reliable transportation to and from work?   YES   NO					
5.	Do you have a valid driver's	s license? □ YES □ NO				
6.	Have you been provided w	ith a copy of the internship position descript	tion for which you are	applying? □ YES	□ NO	
7.	•	requirements?   YES   NO	,	, 0		
8.	•	ntial functions of the internship with or witho	out reasonable accom	modation?   YES	□ NO	
9.	How were you referred to	us?				
	OFESSIONAL REFERENCES ease list persons who know	you well – not friends or relatives.				
	Name	Company Name and Address	Phone	Email	# of Years Known	
ΑP	PLICANT STATEMENT: Plea	ase read each statement carefully before sign	ing.			
		, ,	•			
		ed in this internship application is true and compl nsideration for an internship and may justify my c			g information or omission	
pr	eviously noted), past employers	y or all statements contained in this application as and organizations named in this application to prelease such persons and organizations from any	ovide relevant informati	on and opinions that		
		ICATION OR SUBSEQUENT ACCEPTANCE FOR IN EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIM		DOES NOT CREATE	A CONTRACT OF	
۱h	ave read, understand, and by m	y signature consent to these statements.				
	pplicant Signature		Date	<u></u>		