



# Intern Application

Our policy is to provide equal employment and internship opportunity to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, ancestry, physical or mental disability, or veteran status.

Date \_\_\_\_\_  
Last name \_\_\_\_\_ First name \_\_\_\_\_ Middle name \_\_\_\_\_  
Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Telephone \_\_\_\_\_ Social Security # \_\_\_\_\_

Are you a U.S. citizen or otherwise authorized to work in the U.S. on an unrestricted basis?

(You will be required to provide documentation.)  Yes  No

Will this internship be used for a course requirement?  Yes  No

If yes, please list the course and your required hours \_\_\_\_\_

Have you ever been convicted of a felony? (This will not necessarily affect your application.)

Yes  No

If yes, please describe conditions. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Internship Desired

Position applied for \_\_\_\_\_

How did you hear of this opening? \_\_\_\_\_

Have you ever applied for any position at RMHD before?  Yes  No

When? \_\_\_\_\_

Where? \_\_\_\_\_

Have you ever had any paid or unpaid position at RMHD before?  Yes  No

When? \_\_\_\_\_

Where? \_\_\_\_\_

Are you able to lift 25lbs?  Yes  No

Are you presently employed?  Yes  No



Do you have a valid Texas driver's license?  Yes  No

Are you insurable to drive a House vehicle?  Yes  No

May we contact your present employer?  Yes  No

Date you can start and your desired completion date:

\_\_\_\_\_

Are there any dates during the timeframe listed above that you are not available?  Yes  No

If yes, Please list dates \_\_\_\_\_

Please list days and time you are available to complete your internship \_\_\_\_\_

\_\_\_\_\_

Please list applicable skills \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Education**

School Name and Location	Year	Major	Degree
--------------------------	------	-------	--------

High School _____	_____	_____	_____
-------------------	-------	-------	-------

College _____	_____	_____	_____
---------------	-------	-------	-------

Other Training _____	_____	_____	_____
----------------------	-------	-------	-------

In addition to your work history, are there are other skills, qualifications, or experience that we should consider?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please list any scholastic honors received and offices held in school.

\_\_\_\_\_

Are you planning to continue your studies?  Yes  No

If yes, where and what courses of study?

\_\_\_\_\_



**Employment History (Start with most recent employer)**

Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Telephone \_\_\_\_\_  
Date Started \_\_\_\_\_ Date Ended \_\_\_\_\_  
Name of Supervisor \_\_\_\_\_ May we contact?  Yes  No  
Responsibilities \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Telephone \_\_\_\_\_  
Date Started \_\_\_\_\_ Date Ended \_\_\_\_\_  
Name of Supervisor \_\_\_\_\_ May we contact?  Yes  No  
Responsibilities \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

Company Name \_\_\_\_\_  
Address \_\_\_\_\_ Telephone \_\_\_\_\_  
Date Started \_\_\_\_\_ Date Ended \_\_\_\_\_  
Name of Supervisor \_\_\_\_\_ May we contact?  Yes  No  
Responsibilities \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

**References**

List three professional references, not related to you, who have known you for more than one year.

Name \_\_\_\_\_ Phone \_\_\_\_\_ Years Known \_\_\_\_\_  
Company \_\_\_\_\_ Position \_\_\_\_\_  
Address \_\_\_\_\_  
Email \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Years Known \_\_\_\_\_  
Company \_\_\_\_\_ Position \_\_\_\_\_  
Address \_\_\_\_\_  
Email \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Years Known \_\_\_\_\_  
Company \_\_\_\_\_ Position \_\_\_\_\_  
Address \_\_\_\_\_  
Email \_\_\_\_\_



**Emergency Contact**

In case of emergency, please notify:

Name \_\_\_\_\_ Phone \_\_\_\_\_ Address \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Address \_\_\_\_\_

**Please Read Before Signing:**

I certify that all information provided by me on this application is true and complete to the best of my knowledge and that I have withheld nothing that, if disclosed, would alter the integrity of this application.

I authorize my previous employers, schools, or persons listed as references to give any information regarding employment or educational record. I agree that this company and my previous employers will not be held liable in any respect if an internship/employment offer is not extended, or is withdrawn, or internship is terminated because of false statements, omissions, or answers made by myself on this application. In the event of any internship/employment with this company, I will comply with all rules and regulations as set by the company in any communication distributed to the employees.

In compliance with the Immigration Reform and Control Act of 1986, I understand that I am required to provide approved documentation to the company that verifies my right to work in the United States on the first day of employment.

I understand that internship/employment at this company is “at will,” which means that either I or this company can terminate the internship/employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All internship/employment is continued on that basis. I hereby acknowledge that I have read and understand the above statements.

Signature \_\_\_\_\_ Date \_\_\_\_\_