

Internship and Volunteering Application Form

Name:	
School / University (and major):	
Home Phone:	Mobile:
Email:	Address (city, country):
Date of Birth (MM/DD/YYYY):	Father's Name:
Nationality / Nationalities:	

How did you find out about our Internship and Volunteering Program? Please specify.

<input type="checkbox"/>	Fair:	<input type="checkbox"/>	Friend:
<input type="checkbox"/>	University:	<input type="checkbox"/>	Other:

Please type "x" in the box next to the skills you currently have.

1. Computer Skills

<input type="checkbox"/>	Word	<input type="checkbox"/>	PowerPoint	<input type="checkbox"/>	Adobe Creative Suite 5
<input type="checkbox"/>	Excel	<input type="checkbox"/>	Access	<input type="checkbox"/>	Internet
<input type="checkbox"/>	Other:				

2. Office Skills

<input type="checkbox"/>	Computer Typing	<input type="checkbox"/>	Customer Service	<input type="checkbox"/>	Research
<input type="checkbox"/>	Filing	<input type="checkbox"/>	Designing Presentations	<input type="checkbox"/>	Writing
<input type="checkbox"/>	Other:				

What is your preferred schedule?

Start date:	Days of the week: M T W TH F
End date:	
Hours available:	Total # of hours per week:

Internship Goal and Expectation: Please describe briefly the kinds of activities you would like to be involved in and the specific skills you want to develop.

Signature	Date