

INTERNSHIP APPLICATION

Neighborhood House Association 5660 Copley Dr San Diego, CA 92111 www.neighborhoodhouse.org Tel: 858.715.2642 Fax: 858.715.2670

APPLICANT INFORMATION Please provide us with the following information.				
Name:First Na		Today's Date:	_	
Street Address:				
City/ State/ Zip Code:		Yes		
Home Phone:		What is your availability?		
Cell/ Alternate Phone:		Mon to to to		
		Wedtototo		
Email Address:				
L		_When are you available to start?		
AREAS OF INTEREST Please indicate which progr	ram(s) you are interested in.			
Specific Internship Position	Applying For:		_	
Other Areas of Interest:				
☐ Head Start/ Early Head Start	☐ Senior Service Center	☐ HIV/ AIDS Case ☐ Adult Day Health Management	Care	
Project Enable/ Friendship Clubhouse	☐ The Connection Program	☐ Housing Counseling ☐ Emergency Services		
☐ Something Else (Please Explain):				
INTERN INFORMATION Please complete all information in full. Be as detailed as possible.				
Is an internship a requirement for you? Yes No If yes, how many hours are you required to complete?				
Please further explain the requirement.				
			_	
			_	
Current College/University I	Enrolled At:			
Area(s) of Concentration/Ma	ajor:			
Are you currently enrolled in	n a work experience program?] Yes □ No		
Select your highest Select your highest Select your highest Select Select your highest your highest Select your highest Select your highest your highest Select your highest your highest your highest your highest your highest your highest your high select your high y	ome High School ☐GED/ High	School Diploma 🔲 Bachelor's 🔲 Master's 🗎 Ph.D		
What are your goals or what are you hoping to accomplish through this internship with NHA?				

SKILLS, BACKGROUND AND EMPLOYMENT HISTORY Please provide as much information as possible to help us better understand your qualifications.				
Summarize any skills and/or previous experience relevant to the position you are applying for. Please include any languages you're fluent in / special training you've received.				
Current Employer:	Previous Employer:			
Current Position:	Previous Position:			
Dates Employed:	Dates Employed:			
CRIMINAL HISTORY DISCLOSURE				
Please answer the following question completely and truthfully taking part in internship activities. Applicants will be evaluated Have you ever been convicted of or pleaded no contest to a current of the please explain:	d individually, based upon their own merit.			
Additionally, a criminal background check is performed on all i security number and sign and date below so we can further ex				
I				
Applicant Name (Signed Name) Date	-			
ACREMENT AND CIONATURE				
AGREEMENT AND SIGNATURE				
By submitting this application, I affirm that the facts set forth in accepted as an intern, any false statements, omissions or other may result in my immediate dismissal.				
Applicant Name (Printed Name) Applicant Na	ime (Signed Name) Date			