



McKinleyville Parks and Recreation Internship Application

Name _____ Date _____

Home Phone _____ Cell Phone _____

Mailing Address _____

Permanent Address _____

Email Address _____

Name of University/College _____

Expected Graduation Date _____

Major _____ Area of Emphasis _____

Preferred Starting Date _____ Preferred Ending Date _____

Number of Hours Needed for Internship _____

Do you have access to a vehicle? Yes No

Do you have current car insurance? Yes No

(If yes, please provide a copy of your current car insurance and list Exp. Date _____)

University Internship Advisor _____

Phone _____ E-Mail _____

Best Time to Contact _____

How did you hear about our Internship Program? _____

Areas of Experience

Please check all that apply:

- | | |
|---|---|
| <input type="checkbox"/> Administration | <input type="checkbox"/> Fitness and Health |
| <input type="checkbox"/> Youth Programming | <input type="checkbox"/> Special Events |
| <input type="checkbox"/> Aquatics | <input type="checkbox"/> Arts and Crafts Programs |
| <input type="checkbox"/> Senior Activities | <input type="checkbox"/> Park Operations |
| <input type="checkbox"/> Sports Programming | <input type="checkbox"/> Afterschool Programs |

Please explain all areas checked above, attach a separate piece of paper if necessary _____

Age Group Experience

Please check all that apply:

- | | |
|---|--|
| <input type="checkbox"/> Pre-School | <input type="checkbox"/> Young Adults |
| <input type="checkbox"/> Elementary (K-5 grade) | <input type="checkbox"/> Adults |
| <input type="checkbox"/> Tweens (6-8 grades) | <input type="checkbox"/> Senior Citizens |
| <input type="checkbox"/> Teens (9-12 grades) | |

Supplemental Questions

Please answer the following questions on a separate sheet of paper and submit with application:

1. What areas would you like to gain more experience in and why?
2. What are two goals you have in regards to this internship?
3. What can you contribute to the McKinleyville Parks and Recreation Department?
4. Provide a statement of your career objective.
5. Include any other information you feel we should know.

Signature _____ Date _____