The Arc of Cumberland & Perry Counties Internship Application

Please fill out this form and return to:
71 Ashland Avenue, Carlisle, PA 17013; Attn: Public Relations Specialist

Personal Information:

Last: _____First: _____Middle: _____

Permanent Address: _____

City: _____State: _____ Zip: _____

Name Of College or University: _____

Current Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Other: _____

Email Address: _____

Are you 18 or older: Yes ☐ No ☐

Emergency Notification:

Name: _____ Relationship: _____

Telephone: _____ Other: _____

Background:
Have you ever been convicted of a felony? Yes ☐ No ☐

If so, when and where? _____

_____

Nature of Offense: _____

Have you ever been bonded? Yes ☐ No ☐ Ever refused a bond? Yes ☐ No ☐

Do you have a valid driver's license: Yes ☐ No ☐

Driver's License No. _____State: _____

Please List below any moving violations or accidents within the past 3 years:

_____

_____

Some positions may require a background check, child abuse check, or a physical/TB-test; will you be able to provide those?

Yes ☐ No ☐

Work Authorization:
☐ U.S. Citizen/PermanentResident ☐ F-1 Student Visa ☐ Other: _____

Experience:

Previous Volunteer Experience (Please include contact name and phone number):

_____

_____

Academic Faculty or Internship Coordinator:

Name: _____ Telephone: _____

Email: _____

Anticipated Graduation Date: _____/_____/_____ Current GPA: _____

Anticipated Internship Dates: _____/_____/_____ to _____/_____/_____

Major: _____ Second Major/Minor: _____

Internship Credit Hours: _____

Commitment:

Availability: S M T W TH F S Daytime Hours OR Evening Hours

Do you have specific hours due to a strict schedule? Yes ☐ No ☐ If so, please list below:

_____ _____ _____ _____ _____

Preferred Amount of Hours to Intern at CPARC: _____ per week.

Specific CPARC Program Interested in (Neighbors, Residential, Life Time, Etc.): _____

Please List Related Courses, which supports this request for Internship:

_____

_____

_____

Please list Career Goals you have: _____

_____

_____

Why do you want to Intern with CPARC? : _____

_____

_____

_____

Education:

Name of Colleges, Business or Technical Schools	City/State	Dates Attended	Phone No.

High School Attended	City/State	Dates Attended	Diploma/GED
_____	_____	_____	Yes ☐ No ☐

Community/Professional Organizations, Honors and Awards:

_____

_____

_____

_____

Are you currently employed? Yes ☐ No ☐ **Will you continue to work during your internship?** Yes ☐ No ☐

What Days/Hours will you continue to work? *(If unsure, mark your current work schedule)*

S M T W T H F S Evening Hours: _____Daytime Hours: _____

Beginning with your most recent employer, please list the last 3 jobs you have held.

Company Name:	Telephone:	Job Title:
Address:	City, State, Zip	May we contact this employer? Yes ☐ No ☐
Supervisor's Name:		Employment Dates: ___/___/___ to ___/___/___
Duties:	Reason for Leaving:	

Company Name:	Telephone:	Job Title:
Address:	City, State, Zip	May we contact this employer? Yes ☐ No ☐
Supervisor's Name:		Employment Dates: ___/___/___ to ___/___/___
Duties:	Reason for Leaving:	

Company Name:	Telephone:	Job Title:
Address:	City, State, Zip	May we contact this employer? Yes ☐ No ☐
Supervisor's Name:		Employment Dates: ___/___/___ to ___/___/___

Duties:	Reason for Leaving:

Please list any special clearances (criminal/child abuse/etc.) you may have and the date they were obtained:

_____ **Date:** _____

_____ **Date:** _____

_____ **Date:** _____

References:
Please list three references, not family, who we may contact.

Name	Occupation/Employer	Address	Phone Number

Please give any other information you may wish to include in this application:

_____

_____

_____

_____

_____

Please read statement carefully before signing:

I agree to comply with the rules and regulations of The Arc of Cumberland & Perry Counties (CPARC). I affirm that all statements and answers are true to the best of my knowledge and that I have not withheld any information. I authorize CPARC to conduct any necessary and reasonable investigation with respect to my application, and release former employers and personal references from any liability for damage caused by giving or receiving information or opinions as to my employment or character. It is understood that any false statement may be considered sufficient cause for rejection or for dismissal if an internship had been granted.

Print Name: _____

Signature: _____ Date: _____

Please submit a current resume with the application. Once you have returned the application it will be reviewed, and you will be contacted should further information be needed.

Completed Applications may be returned to:
71 Ashland Avenue
Carlisle, PA 17013
Attn: Public Relations Specialist