

Application for Jubilee Internship

Rev. 3-17-2009



Name of Applicant _____

Address _____ City _____

State _____ Zip _____ Phone _____

Secondary Phone _____ E-mail _____

Present University, Church or Institutional affiliation: _____

Area of study: _____

Supervisor/Teacher Contact Info: _____

Degree expected: _____ Bachelors _____ Masters _____ Doctorate _____ Other

Date degree will be granted (Day/Month/Year) _____

Type of Internship requesting: (Please check one)

- Counseling MSW
- Social Worker/Dorm Advisor (Male Applicants only)
- Ministry leadership
- Recreation Specialist

Briefly explain your reasons for applying to the Jubilee Internship Program.
Please include specific objectives and expected benefits of the internship:

Requested dates for Internship:

From: _____ To: _____

Preferred hours for Internship: (please check one)

_____ Full-time (32 to 40 hours per week) _____ Part-time

Statement of understanding of the conditions of the Internship I understand that, should I be accepted as an intern at Jubilee:

- I will abide by all the policies outlined in both the Employee Handbook and the Student Handbook.
- I am in general agreement of our statement of Faith.
- I would be willing to go through a fingerprint background check at Jubilee expense. (adverse background check results may be cause for termination of the internship)

Signed: _____ Date: _____