

United Way of the Brazos Valley

2019 Internship Application Form



United Way
of the Brazos Valley

Thank you for your interest in interning with us! To help us provide you with the internship experience you are seeking, please submit the completed form along with a cover letter and resume to Mickal Lewis at mlewis@uwbv.org.

Please print the following information:

Name: _____ Date: _____

Name: _____ Date of Birth: _____

Title First

M.I. Last

Suffix

Address: _____ E-mail Address: _____

Telephone Number: () -

City: _____ State: _____ Zip: _____ Term: Spring Summer Fall

How did you hear about United Way of the Brazos Valley?

Please mark which internship(s) you are interested in pursuing:

- Communications
- Community Impact
- 2-1-1 Texas Outreach Intern (Fall/Spring ONLY)

Please indicate availability during the week:

Mon: _____

Tues: _____

Wed: _____

Thurs: _____

Fri: _____

Briefly summarize the skills and personal attributes you wish to apply and improve over the course of your internship:

How long do you wish to intern with United Way of the Brazos Valley? Indicate with start and stop-dates if known:

Are you seeking course credit with this internship? [YES / NO] If YES, then please fill out the following information:

University: _____ Major / Minor: _____ Classification: _____

Please detail any relevant volunteer or job experience you have had recently:

Organization: _____ Position: _____ Telephone Number: () -

Duties: _____

Organization: _____ Position: _____ Telephone Number: () -

Duties: _____

If you have personal or professional references, please list them below:

Name: _____ Phone Number: () - E-mail: _____

Name: _____ Phone Number: () - E-mail: _____

In case of emergency, please contact: _____

Name

Relationship

Phone Number

- I certify that the information I have supplied above is correct.
- I understand that United Way of the Brazos Valley deals with information of a confidential nature, and that I will be bound by their policies and procedures.
- United Way of the Brazos Valley has my permission to contact listed references, employers, and instructors.

Signature: _____ Date: _____