

URBAN ECOLOGY CENTER
1500 E. Park Place
Milwaukee, WI 53211
Voice: 414-964-8505 Fax: 414-964-1084

INTERNSHIP APPLICATION

Date: _____

Last Name	First	Middle	Email Address
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Current Address	City	State/Zip Code	Telephone No.
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Are you either a U.S. Citizen or an alien lawfully authorized to work in the U.S.? o YES o NO

*Proof of identity and authorization for U.S. employment will be required as a condition of employment.

Where did you find out about our program? _____

Do you plan to receive credit for this program through a college or university? If yes, please indicate which institution & how many credits.

Name of Advisor/Cooperating Professor _____

Phone Number/Address _____

Intern positions of interest:

1. _____
2. _____
3. _____

Season for which you are applying: _____

Date(s) that you are available: _____

Number of days per week _____

Permanent address and phone number _____
where a message can always reach you: _____

Emergency Contact (name, relationship, _____

Phone number) _____

Education

College/University City/State Date Graduated Degree

REFERENCES

Please list three. Include name, title, mailing address, phone number, and e-mail address.

EMPLOYMENT

(List most recent first)

Employer Dates Employed Responsibilities Contact and Phone #

VOLUNTEER EXPERIENCES

Organization Volunteer Dates Responsibilities Contact and Phone #

PERSONAL SKILLS AND INTERESTS

STATEMENT OF INTERNSHIP GOALS

YOURSELF

How would you describe yourself? How do you react to pressure? How do you deal with working closely with other people? Include information/situations that help to paint a clear image of what you are like. (Please use additional pages, if needed.)

PLEASE INCLUDE A RESUME WITH THIS APPLICATION.

Do you have a current First Aid certificate?Yes _____ No _____

Do you have a current CPR certificate?Yes _____ No _____

Do you have a current Red Cross lifesaving certificate?.....Yes _____ No _____

List any other certifications:

Can you operate a motor boat?Yes _____ No _____

Do you have a valid driver's license?Yes _____ No _____

Can you drive a standard shift?.....Yes _____ No _____

Will you have a car/motorcycle?Yes _____ No _____

If so, Make: _____ Year: _____ Plate #: _____

State: _____

Has your license ever been suspended or revoked?.....Yes _____ No _____

If yes, explain: _____

Have you ever been convicted of a crime? If yes, please explain.

STATEMENT OF CONTRIBUTIONS

What contributions do you feel that you can make to the Urban Ecology Center?

TOMORROW

In what direction are you moving? Where do you hope to be in five years? What do you hope to be doing?

APPLICANT'S ACKNOWLEDGMENT

I certify that the answers given herein are true and complete to the best of my knowledge. I understand that any misrepresentations, omissions of facts or incomplete answers in any application document will disqualify me from further consideration for a voluntary internship. I further understand that, if accepted, any misrepresentations or omissions of facts in any document will be cause for my dismissal at any time. I give the Urban Ecology Center permission to perform reference checks and criminal background checks.

I, the undersigned, hereby release and hold harmless the Urban Ecology Center, its officers, employees, and volunteers, from any and all liability for mishap or injury in the performance of any duties which I might

perform. I assume all risks incident thereof with respect to myself.

Signature _____ Date _____

Please send application form to :

**Urban Ecology Center
Attn: Tim Vargo
1500 E. Park Place
Milwaukee, WI 53211**