



## INTERNSHIP APPLICATION

ST. ANDREW'S PARKS AND PLAYGROUND / ST. ANDREW'S FAMILY FITNESS PLUS!

TODAY'S DATE: \_\_\_\_\_

YOUR NAME: \_\_\_\_\_

Note: We will begin the review phase of the application process by March 26, 2010. All applications received after this date will still be considered as long as a position remains open

I AM APPLYING FOR A(N) INTERNSHIP IN:

ATHLETICS     HEALTH CLUB MANAGEMENT     MARKETING

COMMUNITY RECREATION     PARK MAINTENANCE

DESIRED DATES (Be as specific as possible)

1ST CHOICE \_\_\_\_\_ TO \_\_\_\_\_

2ND CHOICE \_\_\_\_\_ TO \_\_\_\_\_

CURRENT ADDRESS \_\_\_\_\_

TELEPHONE \_\_\_\_\_ E-MAIL \_\_\_\_\_

PERMANENT ADDRESS (If different) \_\_\_\_\_

TELEPHONE \_\_\_\_\_ E-MAIL \_\_\_\_\_

SCHOOL PRESENTLY ATTENDING (OR MOST RECENT) \_\_\_\_\_

ADDRESS \_\_\_\_\_

YEAR: \_\_\_\_\_ MAJOR: \_\_\_\_\_

MINOR: \_\_\_\_\_

EXPECTED GRADUATION: \_\_\_\_\_



PRESENT OR MOST RECENT OCCUPATION: \_\_\_\_\_

POSITION: \_\_\_\_\_

RESPONSIBILITIES: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

1. WHY DO YOU WANT TO COME TO ST. ANDREW'S PARKS & PLAYGROUND? WHAT DO YOU FEEL THAT YOU WOULD LEARN FROM YOUR EXPERIENCE HERE?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. ARE YOU PLANNING ON DOING ANY RESEARCH? IF SO, BRIEFLY DESCRIBE WHAT YOU WOULD LIKE TO STUDY. A DETAILED PROJECT PROPOSAL IS NOT REQUIRED AT THIS TIME.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. WHAT EXPERIENCE DO YOU HAVE THAT WILL HELP YOU DURING YOUR INTERNSHIP AT ST. ANDREW'S PARKS & PLAYGROUND?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



4. WHAT ARE YOUR GOALS FOR YOUR INTERNSHIP? HOW DO YOU PLAN TO ACHEIVE THEM?

---

---

---

---

---

---

---

---

---

---

5. WHAT ARE YOUR FUTURE CAREER PLANS?

---

---

---

---

6. WHERE DID YOU LEARN OF THE INTERSHIP PROGRAM AT ST. ANDREW'S PARKS & PLAYGROUND?

---

7. DO YOU HAVE ANY MEDICAL CONDITIONS WHICH WOULD POSSIBLY AFFECT YOUR ABILITY TO DO THINGS REQUIRED AT ST. ANDREW'S PARKS & PLAYGROUND? PLEASE DESCRIBE. (FOR EXAMPLE, ALLERGIES, INJURIES, CHRONIC ILLNESS, ETC.)

---

---

8. ARE YOU LEAGALLY ELIGIBLE FOR EMPLOYMENT IN THE UNITED STATES?

Y\_\_ N\_\_

9. CRIMINAL TRAFFIC AND/OR CIVIL COURT RECORD: Have you ever been convicted of and offense in an adult court other than for a minor traffic violation? Y\_\_\_ N\_\_\_ (If answer is YES, give complete details below. A conviction will not necessarily exclude you from employment consideration.)



10. PLEASE ASK YOUR ACADEMIC ADVISOR TO COMMENT REGARDING YOUR INTEREST IN BEING A ST. ANDREW'S PARKS & PLAYGROUND INTERN.

---

---

---

---

---

ADVISOR'S NAME: \_\_\_\_\_

OFFICE PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

ADVISOR'S SIGNATURE: \_\_\_\_\_

**The facts set forth in my application for employment are true and complete. I understand that if I am employed, any false statement on this application may result in my dismissal. I further understand that this application is not intended to be a contract of employment, nor does this application obligate the employer in any way if the employer decides to employ me. I understand and agree that my employment is at-will and can be terminated by either party with or without notice, at any time, for any reason or no reason.**

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE

**RETURN COMPLETED APPLICATION TO:**

**ST. ANDREW'S PARKS & PLAYGROUND  
ATTN: HUMAN RESOURCES DIRECTOR  
1095 PLAYGROUND ROAD  
CHARLESTON SC 29407  
Or to [work@standrewsparks.com](mailto:work@standrewsparks.com)**