



YEAR-LONG INTERNSHIP APPLICATION

Applicants are considered for admission without regard to race, color, gender, religion, national or ethnic origin.

330 Mountain Rd. Cape Neddick, ME 03902 207.361.1911

A. PERSONAL INFORMATION

Your Name _____ Home Phone _____
 Address _____ City _____ State/Zip _____
 E-mail _____ Cell phone _____
 Date of Birth ____-____-____ Place of Birth _____, _____ SS # ____-____-____
For non-U.S. citizens: What type of visa do you have? _____ Expires _____
 Do you have a driver's license? YES NO License # _____ State Issued _____

B. PAST INTERNSHIPS(S) / RELATED EMPLOYMENT

Please provide the following info about three relevant internships / jobs you've held.

Dates	Company Name	Supervisor Name	Phone #	Type of Work Performed
<i>Reason for leaving above position?</i>				
<i>Reason for leaving above position?</i>				
<i>Reason for leaving above position?</i>				

Have you even been convicted of a crime? NO YES

If yes, explain conviction(s), sentence(s) imposed, and type(s) of rehabilitation. Include dates.

C. EDUCATION

TYPE OF SCHOOL	Name of School	Location (full mailing address)	Years Completed	Major(s) and Degree(s)
High School				
College or University				
Bus. or Trade School				
Other Education				

D. PERTINENT QUESTIONS (*complete and/or circle all that apply*)

1. **Why** do you want to **internship** with White Pine Programs?

2. What do you seek **to gain** from interning with White Pine?

3. What do you **expect** from the White Pine Staff & Community?

4. Our internships generally last for 11 months (Sept-July) – can you commit to this? **YES** **NO**

5. How did you hear about White Pine’s Internship opportunities?

6. Have you been an intern in any other organization? **YES** **NO**

If yes, please share the name and location:

7. What are some of your concerns and/or worries about interning with White Pine?

E. TRAINING & CERTIFICATIONS : *Describe your training, formal and informal, for each of the following roles (include all relevant certifications with expiration dates)*

a.) Educator

b.) Mentor

c.) Naturalist

d.) Outdoor Leader

e.) First Aid / Safety *(include CPR info)*

F. REFERENCES:

Please complete the table below with contact information for three non-family references

Name & title	Address	Phone	E-Mail

F. INTERNSHIP SCENARIOS: *In the space provided, please explain how you would handle the following situations:*

1. After interning with our organization for 3 months, you realize that you just don't get along with another staff member. You can't put a finger on it; he/she just rubs you the wrong way. This is affecting your ability to be present at staff meetings and you believe it may be affecting staff unity during programs. What do you do?

2. During a tour of White Pine's nature museum, you notice a 12 year old girl, who is new to the program, put a beautiful flicker feather in her pocket that you think was from the museum collection. What do you do?

3. A parent of a child in one of our programs has been spreading rumors about our programs that are hurting White Pine's image in the community. This parent is well-respected in the local community and has brought a lot of kids into our programs in the past. What do you do?

G. ADDITIONAL INFORMATION/COMMUNICATION

Please use this space to share any additional information we should know about you with relation to working with White Pine Programs. Feel free to express yourself in a creative way if that would best express your desire to contribute to the White Pine community.

H. SIGNATURE

I, _____, the undersigned, agree that all the information contained within this application is truthful and complete.

Signed _____ Dated _____

Thank you for taking the time to complete this application. We will contact you shortly.