



women's resource center  
*of the New River Valley*

INTERN PLACEMENT APPLICATION

Name \_\_\_\_\_  
First Middle Last

Date of Birth \_\_\_\_\_

Local Address \_\_\_\_\_  
No. & Street City State Zip

Permanent Address \_\_\_\_\_  
No. & Street City State Zip

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-mail Address \_\_\_\_\_

Occupation and Job-Related Skills \_\_\_\_\_

Employer and/or School Year \_\_\_\_\_

Educational Background \_\_\_\_\_

Other Training You've Had \_\_\_\_\_

Other Volunteer Experience \_\_\_\_\_

Business Address \_\_\_\_\_  
No. & Street City State Zip

Business Phone \_\_\_\_\_ Is it OK to contact you at work? \_\_\_\_\_

Business Hours \_\_\_\_\_ How long employed? \_\_\_\_\_

Do you own a reliable car? \_\_\_\_\_ If yes, do you have insurance? \_\_\_\_\_

Hobbies, Clubs, Areas of Interest \_\_\_\_\_  
\_\_\_\_\_

What intern position are you applying for: \_\_\_\_\_

How did you hear about the WRC and the internship program? \_\_\_\_\_  
\_\_\_\_\_

Do you sincerely feel you can meet the minimum of at least 8 hours per week interning? Yes \_\_\_\_\_ No \_\_\_\_\_  
Do you sincerely think you will be able to work evenings? Yes \_\_\_\_\_ No \_\_\_\_\_  
Do you sincerely think you will be able to work on weekends? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you authorize the agency to check with appropriate public authorities (e.g. police, courts, motor vehicle department, etc.) for matters of public record regarding your background of history? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been convicted of a crime? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, what crime(s) have you been convicted of? \_\_\_\_\_

Reference:

Please list the names and addresses of three (3) persons who can vouch for your character and who have known you for at least one (1) year (including employer). **Please do not use relatives.** For interns you must provide at least 2 professional references on the written application form. Professional references can include professors, academic advisors, current or former employers (including volunteer positions).

Please type or print.

Professional Reference:

1. Name \_\_\_\_\_  
Relationship to you \_\_\_\_\_ How long known \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_ Phone \_\_\_\_\_

Professional Reference:

2. Name \_\_\_\_\_  
Relationship to you \_\_\_\_\_ How long known \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_ Phone \_\_\_\_\_

Character or Personal Reference:

3. Name \_\_\_\_\_  
Relationship to you \_\_\_\_\_ How long known \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_ Phone \_\_\_\_\_

\*Have you ever applied to become a WRC volunteer or intern before? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, for what position? \_\_\_\_\_ When? \_\_\_\_\_

**INTERNS**

PERMISSION FOR RELEASE OF INFORMATION  
INTERN REFERENCE CHECKS

I, \_\_\_\_\_, do hereby grant permission for the below named  
(Intern candidate)

individuals and/or agencies to release information to the Women's Resource Center concerning my character, employment, performance, skills, competence, and/or general ability.

It is understood that this permission includes cumulative and confidential information which would assist the Women's Resource Center in filling volunteer positions.

	Name	Address	Phone No.
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

Signature \_\_\_\_\_

Date \_\_\_\_\_

**INTERN POLICY**

The Women's Resource Center is an agency designed to provide resources and services to women in crisis; particularly, victims of domestic violence and sexual assault. In determining whether an applicant may be considered to fill a intern position, due consideration must be given to those past and present factors in the health, personality, and behavior of each individual which professional agency personnel deem, under any circumstances, may have a significant effect upon intern's performance within our agency and which, if revealed at a later date, may affect the agency and/or its clients adversely.

The undersigned acknowledges and agrees that (1) he/she is not obligated, if called upon, to perform intern services herein applied for and that the agency is not obligated to assign or actively seek to assign him/her with an intern position and (2) as part of the agency's screening process, additional personal information will be elicited from the applicant by professional agency personnel.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name of Applicant \_\_\_\_\_