



County of Dinwiddie Internship Application

Personal Information:

Name:

Street Address:

City:

State:

Zip:

E-mail Address:

Primary Phone Number:

Alternate Phone Number:

Availability:

Are you legally eligible to work in the United States? Yes No

If you are under age 16, do you possess an employment certificate (work permit)? Yes No N/A

Are you able to arrange your own transportation? Yes No

Indicate the months, days, and hours that you will routinely be available:

January February March April May June

July August September October November December

Sunday Monday Tuesday Wednesday Thursday Friday Saturday

Morning Afternoon Evening

List any dates that your availability will differ from the days and times noted above (ex: planned vacations, involvement with extra-curricular activities, etc.):

Education:

Current School:

Indicate your highest level of education completed:

College Major (if applicable):

List any specialized coursework you have completed (ex: Career and Technical Education Courses):

List any awards, honors and recognitions received (ex: Perfect Attendance, Honor Roll, Dean's List, etc.):



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Work/Volunteer Experience (Use additional pages if needed):

Most Recent Employer:		
Job Title:		
Supervisor:		
Hire Date:	Separation Date:	
Street Address:		
City:	State:	Zip:
Job Duties:		
Reason for leaving:		
Previous Employer:		
Job Title:		
Supervisor:		
Hire Date:	Separation Date:	
Street Address:		
City:	State:	Zip:
Job Duties:		
Reason for leaving:		
Previous Employer:		
Job Title:		
Supervisor:		
Hire Date:	Separation Date:	
Street Address:		
City:	State:	Zip:
Job Duties:		
Reason for leaving:		



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Additional Information:

Provide any additional information that will be helpful in evaluating your application (ex: involvement in extra-curricular activities, clubs, or organizations):

Areas of Interest:

Briefly describe your career interest; be sure to include your desired profession/occupation.

References:

Name:

Phone Number:

Relationship:

Name:

Phone Number:

Relationship:

Name:

Phone Number:

Relationship:

Certification:

I certify that, to the best of my knowledge, all information provided on this application is true and complete. I authorize the verification of any and all information provided. I understand that providing any false information may result in non-selection or separation at any point during the Internship process.

Signature

Date