



(304) 529-4482 ♦ 2240 5th Ave Suite 101 ♦ Huntington, WV 25703

Internship Application

Instructions

- If you need any assistance or accommodations, please inform us.
- Fully complete all pages
- Please type or print in black ink.
- Turn application into the HIT Center Front Desk **AT LEAST two weeks prior** to beginning of internship, in order to be considered.

Personal Information

Full Name- Last	First	Middle	Social Security No.
Present Address- Street	City	County	State Zip Home Phone No:
Previous Address- Street	City	County	State Zip Cell Phone No:
Have you ever Applied for Work or Been Employed by the Company? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, Specify Location and Approximate Date		Email Address:
For Reference Purpose: If you have ever been known by or used another name (e.g. married or maiden name, etc.), specify name and date.	Name and Date:		
Are you a US Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	If No, What Authorization Do You Have to Work In the US?		
Have You Been Convicted of A Criminal Offense Which Has Not Been Annulled or Sealed By A Court? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Please Explain.			
Number Of Days Absent From Work:			
Last Year _____ This Year _____			
Have You or any Member of Your Immediate Family Filed a Claim, Lawsuit or Other Legal Proceeding Against The Company? If Yes, Please Describe. <input type="checkbox"/> Yes <input type="checkbox"/> No			
Date available to begin internship:		How many internship hours do you need to complete? (total, not credit hours):	

Employment or Volunteer Experience

Employment: Please list any previous job or volunteer experience which is [degree or field related](#)

From MO/YR	To MO/YR	Company Name	Company Phone No.
Supervisor's Name and Title			
List Job Title and Explain Duties			
Starting Salary or Rate	Final Salary or Rate	Reason for Leaving <input type="checkbox"/> Resigned <input type="checkbox"/> Laid Off <input type="checkbox"/> Discharged (Explain)	

From MO/YR	To MO/YR	Company Name	Company Phone No.
Supervisor's Name and Title			
List Job Title and Explain Duties			
Starting Salary or Rate	Final Salary or Rate	Reason for Leaving <input type="checkbox"/> Resigned <input type="checkbox"/> Laid Off <input type="checkbox"/> Discharged (Explain)	

From MO/YR	To MO/YR	Company Name	Company Phone No.
Supervisor's Name and Title			
List Job Title and Explain Duties			
Starting Salary or Rate	Final Salary or Rate	Reason for Leaving <input type="checkbox"/> Resigned <input type="checkbox"/> Laid Off <input type="checkbox"/> Discharged (Explain)	

Education Record

Name and Location of School	<u>Dates From</u> Mo/Yr	<u>Attended To</u> Mo/Yr	<u>Graduation Date</u> Mo/ Yr	Grade Point Avg.	Major Subject & Degree
High School					
Vocational or Tech. School					
College or University					
College or University					
Graduate School					

Activities

Please list any sports you play or have played and indicate at what level (ie: High School or College)
Do you work out on a regular basis?
Do you or have you ever lifted weights?
Do you consider yourself introverted or extraverted?
How did you hear about the HIT Center as an internship opportunity?