

THE BRIDGE FOR YOUTH  
INTERNSHIP APPLICATION

Name \_\_\_\_\_

Email address: \_\_\_\_\_

Cell phone \_\_\_\_\_

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

Internship Type:  MSW First Year  MSW Second Year  BSW Senior  Counseling Psychology  Other

Preferred orientation group:  May  September  January

Date Available to Start \_\_\_\_\_

Total Number of Hours Needed \_\_\_\_\_

Preferred schedule Days/Times (Morning shifts 8:00 am-4:00 pm; Afternoon Shifts 2:30-10:30 pm) (One weekend shift per month required) \_\_\_\_\_

Do you have a criminal record?  Yes  No

If yes, please explain: \_\_\_\_\_

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EMPLOYMENT/EXPERIENCE HISTORY: Please submit resume & cover letter with application

SCHOOL INFORMATION: If your internship is for school credit, please complete the following:

School \_\_\_\_\_

Field Liaison \_\_\_\_\_

Email address \_\_\_\_\_

Phone Number \_\_\_\_\_

In case of emergency contact:

Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship \_\_\_\_\_

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Previous Internship Experience (Please include organization, dates, and responsibilities)

Briefly describe experiences (education, family, special training, etc.) you feel have prepared you for an internship at The Bridge.

Please describe your interests, hobbies, or skills you feel may be of interest to adolescents.

Please describe what you hope to gain from your experience at The Bridge, as well as what you hope to offer.