**Undergraduate Youth Work Internship Application Form**

*Please check on the AHSC website for information about deadlines and the internship instructor for the next academic year. Applications must be completed in the winter proceeding the year of registration.*

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| **Student’s Name:** | | | |  | | | | | | | | | |
| **Student Number:** | | | |  | | | | | | | | | |
| **email address:** | | | |  | | | | | | | | | |
| **cell phone:** |  | | | | | | **home phone:** | | | |  | | |
| **mailing address:** | | |  | | | | | | | | | | |
| **Previous Employment Experience:** | | | | | | | | | | | | | |
| **Name of Organization** | | | | | | | | **From:** yr/mth | | | | **To:** yr/mth | |
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| **Previous Volunteer Experience:** | | | | | | | | | | | | | |
| **Name of Organization** | | | | | | | | **From:** yr/mth | | | | **To:** yr/mth | |
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| **Please describe your reason(s) for choosing an internship in youth work:** | | | | | | | | | | | | | |
| **Preferred area of youth work practice? (identify below order of preference – 1st choice, 2nd choice)** | | | | | | | | | | | | | |
| **Residential Care:** |  | | | | **School:** |  | | | | **Community-based:** | | |  |
| **Other comments:** | | | | | | | | | | | | | |
| **Student’s Signature:** | |  | | | | | | | **Date:** | | | | |