

# **INTERNSHIP APPLICATION**

Please send this application with a cover letter and current resume to <a href="mailto:info@northdakota.wish.org">info@northdakota.wish.org</a>.

CONTACT INFORMATION					
Full Name: Click here to enter text.					
Current Street Address: Click here to enter text.					
City: Click here to enter text.	State: Click here to enter text.	Zip: Click here to enter text.			
E-mail Address: Click here to enter text.	Phone Number (Preferred): Click here to enter text.				
College Attending: Click here to enter text.	Year in College: Click here to enter text.				
Major: Click here to enter text.	Minor (if applicable): Click here to enter text.				

AVAILABILITY							
Are you available to attend an intern training and a minimum of two events outside office hours? Click here to enter text.							
Are you able to commit to volunteering on one wish during the span of your internship? Click here to enter text.							
This internship requires 10-20 hours working in the office weekly. Please list your availability between 8:00am-5:00pm next to each day below.							
Monday: Click here to	Tuesday: Click h	ere to	Wednesday: Click here	Thursday: Click here to		Friday: Click here to	
enter text.	enter text.		to enter text.	enter text. enter te		enter text.	
Please note which semester you would like to complete an internship with Make-A-Wish® North Dakota. Preference may be given							
to applicants able to work more than one semester.							
Spring (January-May): Clic	ck here to	Summer (May-August): Click here to Fall (August-December): Click here		ember): Click here to			
enter text.		enter t	enter text.		enter text.		

INTERESTS  Please rank 1-4 (1 being the most preferred position)				
Finance/Accounting: Click here to enter text.				
Special Projects: Click here to enter text.				
Communications: Click here to enter text.				
Program Services: Click here to enter text.				

### **SKILLS**

 $\label{thm:please} \mbox{Please list software and computer programs you have used and your level of expertise.}$ 

Click here to enter text.



NON-PROFIT/VOLUNTEER EXPERIENCE			
Please list all volunteer or non-profit experience. Please provide details for any previous internships or jobs you've held in the non-profit sector.  Click here to enter text.			
INTERNSHIP REQUIREMENTS			
Would you like to complete this internship for course credit? If so, please describe the requirements. If not, please explain your own personal objectives/goals.  Click here to enter text.			
PREFERRED POSITION			
On page 1, you noted which position you prefer. Please explain why and share any relevant experience. Do you have any concerns regarding this position? Are you willing to work in another department?			

Click here to enter text.



## MAKE-A-WISH EXPERIENCE/HISTORY

Please share your understanding of our history and mission. Also, be sure to include any information about experience you have working with Make-A-Wish, if applicable.

Click here to enter text.

### **ADDITIONAL QUESTIONS**

Please explain why you believe you should be considered for an internship with the Make-A-Wish North Dakota. Click here to enter text.

#### **REFERENCES**

Please list two professional references. We prefer references to be able to speak about relevant skills pertaining to the position you are seeking. **No relatives please. This is required in order to be considered.** 

#### REFERENCE #1

First and Last Name: Click here to enter text.

Relationship to you: Click here to enter text.

E-mail Address: Click here to enter text. Phone Number: Click here to enter text.

### REFERENCE #2

First and Last Name: Click here to enter text.

Relationship to you: Click here to enter text.

E-mail Address: Click here to enter text. Phone Number: Click here to enter text.

### **OUR POLICY**

It is the policy of this organization to provide equal opportunities without regard to race, color, region, national origin, gender, sexual preference, age, or disability.

Thank you for your interest in the Make-A-Wish North Dakota Program.