

Community Connections Program

Internship Description Form

Please follow these guidelines to complete the Internship Description Form:

1. The form must be **typed** or **neatly** handwritten. Handwritten forms are difficult to read and do not photocopy well. Potential interns will be reading and choosing amongst these forms.
2. Give complete and concise information on all lines of the form. Do not leave blank lines. If an item does not apply, please write N/A.
3. Your agency must be able to provide at least 4-6 hours of supervised work for the interns.
4. The information you provide must stand on its own; do not make references to other materials; if possible attach additional information to the IDF.
5. The IDF allows for you to list more than one internship position at your agency. You may list distinguishing comments in the "Program/Project Responsibilities" box on the reverse side.
6. Copy this form if there are more than 2 different internship positions.
7. Please include a copy of your agency's insurance certificate.

Agency Information

TODAY'S DATE:	
Agency Name:	
Agency Address: (Include Street, City, ZIP)	
Contact Person, Title:	
Contact Person, Title: (if more than one)	
Phone Number:	
Fax Number:	
E-mail Address:	
WWW Home Page:	

Agency Description

Agency Purpose and Goals: <i>(attach brochure also)</i>
Agency Services and Activities: <i>(attach brochure(s) also)</i>
Population Served:
Parent Organization(s):
Wheelchair Accessible: YES NO Age of Agency (Years):

Internship Position Title

1.	Number of Interns needed:
2.	Number of Interns needed:

Internship #1 – Program/Project Responsibilities

Duties:

Experience Required:

Hours Required per week: 4 5 6 Other: _____ Day(s) required per week: _____

Type of training/skills provided or needed:

Language Requirement: <i>(circle one)</i> YES NO What language(s)? _____	Would monolingual English interns be useful: <i>(circle one)</i> YES NO
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Other requirements or comments:

Internship #2 – Program/Project Responsibilities

Duties:

Experience Required:

Hours Required per week: 4 5 6 Other: _____ Day(s) required per week: _____

Type of training provided or needed:

Language Requirement: <i>(circle one)</i> YES NO What language(s)? _____	Would monolingual English interns be useful: <i>(circle one)</i> YES NO
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Other requirements or comments:

NICOS OFFICE USE ONLY

Date approved _____ Last Update: _____ Other Programs: _____