



APPLICATION FOR INTERNSHIP
Junior Program Assistant

Applications are due by March 10, 2010.
Employment offers are made on a rolling basis.
You are encouraged to apply early.

PART I: PERSONAL INFORMATION

Name: _____
First Middle Last

Age: _____ Date of Birth: _____ Male _____ Female _____

Home Phone Number: (____) _____ - _____

Cell Phone Number: (____) _____ - _____

Work Phone Number: (____) _____ - _____

The best time to reach me is:
 Day Evening
by calling my:
 Home Cell Work

E-mail Address: _____

Current Mailing Address: _____
Street Address

City State Zip Code

You can be reached at this address until: _____

Permanent Address: _____
Street Address

City State Zip Code

Social Security Number: _____

Driver's License Number: _____ State: _____

Are you a citizen or permanent resident of the United States? Yes No
If no, please attach photocopies of your work authorization documents.

Contact in Case of Emergency:

Name Phone Number Relationship to You

Secondary Contact in Case of Emergency:

Name Phone Number Relationship to You

PART II: EDUCATION

High School: _____

Will you have completed your senior year by June 2010?

Yes No

Dates of Enrollment: _____

School Address: _____

Street Address

City

State

Zip Code

Scholastic Honors / Extracurricular Interests:

I have enclosed a photocopy of my current high school transcript: Yes No

PART III: SAFETY CERTIFICATIONS

Do you have CPR training and certification? Yes No

Do you have First Aid training and certification? Yes No

Do you have any additional certifications? Yes No

If yes, please list: _____

PART IV: EMPLOYMENT HISTORY AND REFERENCES

Please list your employers, beginning with the most recent.

1) Employer: _____

Dates of Employment: _____

Employer's Address: _____

Street Address

City

State

Zip Code

Position / Responsibilities: _____

Immediate Supervisor: _____

Phone Number: (_____) _____ - _____

E-mail Address: _____

2) Employer: _____

Dates of Employment: _____

Employer's Address: _____

Street Address

City

State

Zip Code

Position / Responsibilities: _____

Immediate Supervisor: _____

Phone Number: (_____) _____ - _____

E-mail Address: _____

3) Employer: _____

Dates of Employment: _____

Employer's Address: _____

Street Address

City

State

Zip Code

Position / Responsibilities: _____

Immediate Supervisor: _____

Phone Number: (_____) _____ - _____

E-mail Address: _____

PART V: LETTERS OF REFERENCE

Select three people to write letters of reference. These people should know you well enough to reflect on your character, personality, and commitment (in some regard), and they should not be family members. At least one of your references should be from a teacher in the school you are currently attending, or last attended.

Please use our Letter of Reference form when requesting recommendations. Complete the top portion of each form before giving them to whoever will be writing on your behalf.

PART VI: ADDITIONAL PERSONAL REFERENCES

Please list two people (other than family members) who know you well and are familiar with your qualifications. These references should not be the same people who are writing your recommendations.

1) Name: _____

Phone Number: (_____) _____ - _____ Relationship to You: _____

Reference's Address: _____

Street Address

City

State

Zip Code

E-mail Address: _____

2) Name: _____

Phone Number: (_____) _____ - _____ Relationship to You: _____

Reference's Address: _____

Street Address

City

State

Zip Code

E-mail Address: _____

PART VII: GENERAL INFORMATION

Have you ever been fired from a paid or volunteer position? Yes No

Have you ever been involved in a disciplinary action at school? Yes No

Have you ever been charged with or convicted of a felony? Yes No

Have you ever been charged with or convicted of any child abuse or sex related offenses?
 Yes No

If you answered 'yes' to any of the above, please explain: _____

PART VIII: SHORT ANSWERS

In order to give us the most complete sense of who you are, please respond to the following questions, in your own words. Questions can be answered in the space provided, but you may attach additional sheets.

1) What most interests you about the Great Books Summer Program, and what do you hope to gain from the Program Assistant position?

2) What do you consider to be your greatest achievement and why?

3) Describe the significance of reading and literature to you.

4) Describe a leadership experience that you have had and why it was important to you. (We encourage you to elaborate on work you have done with young people, as the attendees of the Great Books Summer Program will be 12-18 years old.)

5) (Optional question) Tell us more if you'd like. For example: Do you have strong management or organizational skills? Communications skills? Athletic/Sports/Arts abilities?

PART IX: SESSION SELECTION

Please select the Great Books Summer Program session(s) that you are applying for:

- Stanford University: (Candidates who are able to work for all three sessions are preferred.)
 - Session I: June 20 – June 26
 - Session II: June 27 – July 3
 - Session III: July 4 – July 10

- Amherst College
 - Session I: June 27 – July 3
 - Session II: July 4 – July 10
 - Session III: July 11 – July 17
 - Session IV: July 18 – July 24
 - Session V: July 25 – July 31

Every Junior Program Assistant is required to attend an orientation session at the beginning of the program. Orientation will be held from approximately June 16 to June 19 at Stanford, and June 22 to June 26 at Amherst. Meals and housing will be provided during this time.

PART X: APPLICATION AGREEMENT

I understand that Great Books Summer Program will investigate the accuracy of all information provided throughout the application process. I authorize Great Books Summer Program to conduct a thorough background check including, but not limited to, reference and criminal records checks. Yes

I understand that submitting false or misleading information is grounds for dismissal; I certify that all of the information provided on this application and throughout the application/interview process is correct and true. Yes

Signature: _____

Date: _____

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