I meet the following criteria:

At least 18 years of age

Currently enrolled as a student in an educational facility, college, or university

**Personal History**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name: (Last, First, Middle)** | Click or tap here to enter text. | **Date of Birth:** | Click or tap here to enter text. |
| **Address:** | Click or tap here to enter text. | | |
| **City:** | Click or tap here to enter text. | **State:** | Choose an item. |
| **Zip Code:** | Click or tap here to enter text. |  |  |
| **Home Phone Number:** | Click or tap here to enter text. | **Cell Phone Number:** | Click or tap here to enter text. |
| **Driver’s License Number:** | Click or tap here to enter text. | **State:** | Choose an item. |
| **US Citizen** | Yes No | | |
| **Email Address:** | Click or tap here to enter text. | | |

**Emergency Contact Information**

|  |  |  |  |
| --- | --- | --- | --- |
| **In case of Emergency Notify:** | Click or tap here to enter text. | **Relationship:** | Click or tap here to enter text. |
| **Address** | Click or tap here to enter text. | **Phone Number:** | Click or tap here to enter text. |

**Education**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **College/University:** | | Click or tap here to enter text. | | | |
| **Major:** | | Click or tap here to enter text. | | | |
| **Course Name that Requires Internship:** | | | Click or tap here to enter text. | | |
| **Course Instructor Name:** | Click or tap here to enter text. | | | **Course Number:** | Click or tap here to enter text. |
| **Provide a description of the course for which internship grants credit and any requirements** | | | | | |
| Click or tap here to enter text. | | | | | |

**Criminal Record**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Have you ever been convicted of any law violation other than a minor traffic offense?** | | | Yes No | |
| **AUTHORIZATION: I understand a criminal background check will be completed** | | | | |
| **Applicant Signature:** | Click or tap here to enter text. | **Date:** | | Click or tap here to enter text. |

**FOR HCSO USE ONLY**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Background check completed; applicant is:** | | Eligible Background Ineligible Background | | |
| **HR Manager Signature:** | Click or tap here to enter text. | | **Date:** | Click or tap here to enter text. |
| **Training Manager:** | Approved Disapproved | |  |  |
| **Training Manager Signature:** | Click or tap here to enter text. | | **Date:** | Click or tap here to enter text. |

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