

**Castle View High School
Class of 2012 Senior Internship Application**

Please return application and supplemental documents to:

Cheryl Myhra, Dean of Students
Castle View High School
5254 North Meadows Drive
Castle Rock, CO 80109
cheryl.myhra@dcsdk12.org
303-387-9018

Lisa Jossi, Internship Assistant
Castle View High School
5254 North Meadows Drive
Castle Rock, CO 80109
lisa.jossi@dcsdk12.org
303-387-9027

Name _____
Last First Middle

Address _____

City _____ State _____ Zip Code _____

E-mail Address _____ Cell Phone _____

Father's Name _____ Mother's Name _____

Home Phone Number _____ Parent Cell _____

Academic Preparation

Academy _____ Advisement Teacher _____ Counselor _____

Courses completed OR to be completed as a senior to prepare you for your specific internship request.

_____	_____
_____	_____
_____	_____
_____	_____

Work Experience

Employer	Supervisor	Mailing Address	Phone
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Volunteer/Community Service Experience

Agency	Supervisor	Type of Service	Hours	Dates
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_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Leadership Activities (officer, captain of team, etc)

Activity	Sponsor	Position	Dates

Internship Preference

List in order of preference, three specific job titles for your internship experience and an internship location and contact if you have one

Internship Preference	Location	Contact Name	Phone Number

Scheduling Options

_____ school release time	_____ after school	_____ weekends	
_____ one term	_____ two terms	_____ three terms	_____ four terms
_____ first quarter (August-October)	_____ second quarter (October-December)	_____ third quarter (January-March)	_____ fourth quarter (March-May)

Reason for your choices

Attach the following supplemental documents to the application form:

- Vehicle/Insurance verification – obtain a parental signature verifying you will have transportation during the quarter of your internship and attach to the application.
- Personal Statement – word process a paragraph response to each the following questions (one paragraph per question) and attach to the application.
 - Why did you choose to apply to the Senior Internship Program?
 - Describe your ideal internship site and the career in which you would be interning.
 - What are your personal and academic strengths and characteristics which make you a strong candidate for your requested internship?
 - What classes, volunteer or community service activities and/or extracurricular activities (in school or in the community) have prepared you for your requested internship?
 - What do you expect to contribute to and gain from the internship experience?

Completed application must be submitted to Cheryl Myhra, Dean of Students or Lisa Jossi, Internship Assistant