

Internship @ Your Library Roaring Spring Community Library

Date:

Semester Applying For: Fall ___ Spring ___ Summer ___ Anticipated Graduation Date _____

Personal Information

Name:

Telephone:

Cell Phone:

Email:

Address:

City:

State:

Zip Code:

Education

Highest level completed: ___ High School ___ Certificate Program ___ College Degree

Please list college degree, certificate programs completed (if any): _____

Is an Internship required by your current program? _____

Please provide name and contact for supervising instructor: _____

I am available to work:

Day	Monday	Tuesday	Wednesday	Thursday
Time				

Is this internship required for current program?

If so, how many hours are required?

What is your preferred start date _____ complete date _____ ?

Internship Interest and Specific Skills:
Why are you interested in Intern @ Your library program? (Please be specific)
How would an internship assist you in future career goals?
Do you have any specific requirements for your internship?
What skills, interests or experiences do you have that might be useful in a library setting? Explain

Personal References: (List Three)		
Name	Relationship	Phone
Name	Relationship	Phone
Name	Relationship	Phone

<p>Please Read and Sign</p> <p>I certify the statements in this internship application are true and correct and have been given voluntarily. I understand R.S.C.L. reserves the right to screen interns, to accept or reject any applications and place applicant in specific positions based on library needs.</p> <p>Signature: _____ Date: _____</p>

***Please submit a letter of interest, resume, and completed application to
mmcintyre@roaringspringlibrary.org***