# Internship Application

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| Contact Information | |
|  | |
| Name |  |
| Street Address |  |
| City ST ZIP Code |  |
| Home Phone |  |
| Work Phone |  |
| E-Mail Address |  |
| Date of Birth |  |
| University |  |
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| Availability | |
| How long are you able to do Internship in Indonesia ?  How many hours and day are you available for volunteer work ?  When will you plan to go for Internship work (day/date/month/year) | |
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| *Information* | | | |
| *Tell us in how did you know about our Site* | | | |
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| |  | | --- | | *Special Skills or Qualifications* | | *Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.* | |  | |  | | | | |
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| *Travel Insurance* | |
| *Do you have travel /life/medical insurance ? If Yes write down your Insurance company and registered number.* | |
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| *Motivation* | |
| *Briefly explain what motivate You to Join our Internship Program.* | |
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| *Expectation* | |
| *Briefly explain what Do you expect from our Internship program in Indonesia ?* | |
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| |  | | --- | | *Special Skills or Qualifications* | | *Summarize special skills and qualifications you have acquired from employment, previous Internship work, or through other activities, including hobbies or sports.* | |  | |  | |
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| |  |  | | --- | --- | | Person to Notify in Case of Emergency | | |  | | | Name |  | | Street Address |  | | City ST ZIP Code |  | | Home Phone |  | | Work Phone |  | | E-Mail Address |  | |
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| Agreement and Signature | |
| By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal. | |
|  | |
| Name (printed) |  |
| Signature |  |
| Date |  |

*Notes : please attached your recent photograph in this file or in separate attachement*.

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| Our Policy |
| It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.  Thank you for completing this application form and for your interest in volunteering with us.  Please send this form to goindonesia.westjava@gmail.com |