

Customer Internship Program Internship Application

The purpose of the DVR Customer Internship Program is to enable individuals to gain paid work experience in their chosen fields of employment while they are completing their Individualized Plan for Employment (IPE).

If you would like to participate in the DVR Customer Internship Program, complete this application and discuss it with your Vocational Rehabilitation Counselor (VRC).

This application will be shared with potential host employers if you are selected to participate in the DVR Customer Internship Program.

CUSTOMER'S NAME

YOUR VR TEAM NAME

YOUR DVR EMPLOYMENT GOAL

Why do you want to do an internship and what do you want to gain from experience?

What field of employment are you interested in for an internship?

- | | |
|---|--|
| <input type="checkbox"/> Accounting, auditing, bookkeeping | <input type="checkbox"/> Healthcare professional |
| <input type="checkbox"/> Administrative, office support | <input type="checkbox"/> Healthcare aid |
| <input type="checkbox"/> Arts, design | <input type="checkbox"/> Hospitality |
| <input type="checkbox"/> Building maintenance, grounds keeping | <input type="checkbox"/> Legal, paralegal |
| <input type="checkbox"/> Business, financial | <input type="checkbox"/> Management |
| <input type="checkbox"/> Computer, software, Information Technology | <input type="checkbox"/> Personal care |
| <input type="checkbox"/> Construction, remodeling | <input type="checkbox"/> Production, manufacturing |
| <input type="checkbox"/> Education, training | <input type="checkbox"/> Sales, retail |
| <input type="checkbox"/> Farming, forestry | <input type="checkbox"/> Social services |
| <input type="checkbox"/> Food preparation, serving | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Other: | |

Would you prefer a virtual internship? Yes No

What type of internship work schedule do you want?

How many hours/day do you want to work?

How many days/week?

What time do you want to start work each day?

What time do you want to finish work each day?

What hourly wage would you like? \$ / hour

What geographical area do you want to work in?

Do you have any major activities planned that will disrupt your internship work schedule? Yes No

If yes, please explain:

Your education and work experience

Education: Please check the highest level of education you have completed.

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> High School | <input type="checkbox"/> Vocational certification | <input type="checkbox"/> BA or BS degree | <input type="checkbox"/> MA or MS degree |
| <input type="checkbox"/> Some college or vocational training, no degree | <input type="checkbox"/> AA degree | <input type="checkbox"/> PHD | |

Work experience: Please attach a copy of your current resume to this application.