

Applicant's Name: _____

Current Address:

Permanent Address:

Address Apt#

Address Apt#

City State Zip

City State Zip

Email Address: _____

WWW Address: _____

Home Phone: _____

Work Phone: _____

Mobile/Pager: _____

Gender:

Male

Female

Age:

Ethnicity: (Optional)

American Indian/
Alaskan Native

Hispanic/ Latino

African American (not
Latino)

Asian

White (not Latino)

Multi-Racial

Native Hawaiian/
Pacific Islander

Other

How did you hear about our Internship/Volunteer Opportunity?

Newspaper

Craigslist

School

Radio

Church

Friend

Website

Other

If Other: _____

Time Frame or Semester:

Spring

Summer

Fall

Spring &
Summer

Summer &
Fall

If Other: _____

Will you receive college credit and a grade?

Yes

No

Do you have reliable transportation?

Yes

No

What form of transportation?

Car

Bus

Bicycle

Other

Education:

High School Diploma?

Yes

No

College Experience:

1-2 years 3-4 years Degree _____ Major/Minor _____

Long Term Career Goals: _____

Prior Experience, Internships, Volunteer Work and/or Special Training: _____

Prior Work Experience:

Where	From	To	Type of work	
1.				<input type="checkbox"/> Volunteer <input type="checkbox"/> Paid
Where	From	To	Type of work	<input type="checkbox"/>
2.				<input type="checkbox"/> Volunteer <input type="checkbox"/> Paid
Where	From	To	Type of work	<input type="checkbox"/>
3.				<input type="checkbox"/> Volunteer <input type="checkbox"/> Paid

Computer Skills:

- | | | | |
|---|---|--------------------------------------|---------------------------------------|
| <input type="checkbox"/> Mac and/or PC | <input type="checkbox"/> Network Administration | <input type="checkbox"/> Photoshop | <input type="checkbox"/> Flash |
| <input type="checkbox"/> Quick Books | <input type="checkbox"/> HTML Programming | <input type="checkbox"/> Dreamweaver | <input type="checkbox"/> Image Ready |
| <input type="checkbox"/> Microsoft Office | <input type="checkbox"/> RSS Feeds | <input type="checkbox"/> Illustrator | <input type="checkbox"/> Acrobat |
| <input type="checkbox"/> Filemaker Pro | <input type="checkbox"/> Digital Camera | <input type="checkbox"/> InDesign | <input type="checkbox"/> FinalCut Pro |
| | <input type="checkbox"/> Scanner | <input type="checkbox"/> Fireworks | |

List other Software that you know how to use: _____

What area(s) of DiverseArts are you interested in? (Check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Marketing/Publicity/Sales | <input type="checkbox"/> Production Crew/ Technical Production |
| <input type="checkbox"/> Ad Sales - Sponsorships | <input type="checkbox"/> Stage |
| <input type="checkbox"/> Copywriting/Press Writing | <input type="checkbox"/> Sound |
| <input type="checkbox"/> Graphic Design | <input type="checkbox"/> Lighting |
| <input type="checkbox"/> Promotions/Campaigns | <input type="checkbox"/> Video/Film |
| | <input type="checkbox"/> House Management |
| <input type="checkbox"/> Fundraising/ Development | <input type="checkbox"/> Concessions Management |
| <input type="checkbox"/> Grant Writing | <input type="checkbox"/> Merchandising |
| <input type="checkbox"/> Capital Campaigns | |
| <input type="checkbox"/> Publishing/Editorial | <input type="checkbox"/> Arts Management |
| <input type="checkbox"/> Copy editing | <input type="checkbox"/> Administrative/Office Management |
| <input type="checkbox"/> Art/Music reviews | <input type="checkbox"/> Event Coordinating |
| <input type="checkbox"/> Book Reviews | <input type="checkbox"/> Production Coordinating |
| <input type="checkbox"/> Arts/Cultural Assignments | <input type="checkbox"/> Photography |
| <input type="checkbox"/> Poetry/Fiction | <input type="checkbox"/> Bookkeeping/Accounting |

What makes you a good candidate for an internship at DiverseArts?

List some of your strengths: _____

Weaknesses: _____



INTERNSHIP APPLICATION
Volunteer Profile

What do you envision as your activities as a DA intern/volunteer?

What do you hope to gain from your internship or volunteer work?

What special skills do you have to offer DA?

Do you have any disabilities that we should be aware of?

- Yes No

If yes _____

Please list 3 references (not related to you):

Name _____ Phone _____

Name _____ Phone _____

Name _____ Phone _____

<input type="checkbox"/> Work
<input type="checkbox"/> Academic
<input type="checkbox"/> Work
<input type="checkbox"/> Academic
<input type="checkbox"/> Work
<input type="checkbox"/> Academic

Below is a list of available schedules. You may be able to work a variety of hours. Please include any special scheduling requests.

Mornings	Midday	Afternoons	All Day
<i>10am – 2pm</i>	<i>11am – 3pm</i>	<i>2pm – 6pm</i>	<i>11am – 6pm</i>
<input type="checkbox"/> M-T-W <input type="checkbox"/> W-Th-F <input type="checkbox"/> M-F	<input type="checkbox"/> M-T-W <input type="checkbox"/> W-Th-F <input type="checkbox"/> M-F	<input type="checkbox"/> M-T-W <input type="checkbox"/> W-Th-F <input type="checkbox"/> M-F	<input type="checkbox"/> M-T-W <input type="checkbox"/> W-Th-F <input type="checkbox"/> M-F <input type="checkbox"/> Open

Special Scheduling Requests:

Certification/Consent

I certify that all of the information submitted in this application is true to the best of my knowledge and belief. I understand that any significant misstatement in, or omission of, this application may be the cause for denial of selection of or dismissal from an internship position. I authorize DA to consult with persons who have may have information on my professional competence, character and ethical qualifications. I release from liability all individuals and organizations who provide information to DA in good faith and without malice concerning my qualifications.

Confidentiality Agreement

I understand and agree that as an intern for DA I have access to sensitive information of a confidential nature and agree to maintain the confidentiality of DA's information including its' business associates, donors and prospects. I understand that a breach of this agreement will be grounds for termination. DA is an "at will" employer, therefore I understand the relationship between DA and myself is voluntary and may be terminated by either party without cause or notice at any time.

Applicant's Signature

Date

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