

APPLICATION FOR INTERNSHIP
AT MILC OR AT RECOVERY CENTERS

Personal Information (please print)		
Name:	Today's Date:	
Date of Birth:	Gender: M F	
Address:		
City:	State:	Zip:
Email:		
Phone:	Alternate Phone:	
Emergency Contact:		Relationship:
Emergency Contact Phone(s):		
Over 18? Circle one: YES NO	Parent/Guardian Name:	

Internship Opportunities/Interests (Check all that apply and add additional skills/interests below)		
<u>Agency Support:</u> <input type="checkbox"/> Advocacy <input type="checkbox"/> Fundraising <input type="checkbox"/> Special Events <input type="checkbox"/> Planning Committee	<u>Clerical/Office:</u> <input type="checkbox"/> Answering Phones <input type="checkbox"/> Copying/collating <input type="checkbox"/> Data Entry/Computers <input type="checkbox"/> Filing <input type="checkbox"/> Mailings	<u>Programs:</u> <input type="checkbox"/> Youth <input type="checkbox"/> Peer Mentoring <input type="checkbox"/> Wellness <input type="checkbox"/> Adaptive Sports <input type="checkbox"/> Equipment maintenance
<u>Public Relations:</u> <input type="checkbox"/> Marketing <input type="checkbox"/> Photography <input type="checkbox"/> Graphic Design <input type="checkbox"/> Social Media	<u>Technology:</u> <input type="checkbox"/> Webpage design/update <input type="checkbox"/> Programming <input type="checkbox"/> Refurbish computers <input type="checkbox"/> Technology mentor	<u>Consumer Support:</u> <input type="checkbox"/> IL Skills Training <input type="checkbox"/> Mentoring

INTERN EXPECTATIONS:

- Attendance: please be on time. If you are unable to attend a scheduled time you are volunteering, call the Volunteer Coordinator by 7:30 that morning at 715-344-4210 x228.
- Confidentiality: read and sign the Confidentiality Agreement and maintain consumers' confidentiality.
- Ethics: following the Code of Ethics provided in your Volunteer Training.

Availability (please list the days and times you are available):	
Days of the Week:	
Time of Day:	Hours per Day:

Location/Comments:

Circle One: ABW RCC ROCC Point

Intern or Guardian Signature

Date

Volunteer Coordinator Signature

Date