

INHISNAME UNITED

INTERN APPLICATION FORM

Name: _____ D.O.B _____ (mm/dd/yy)
(Last) (First) (MI)

Local Address: _____
(street) (city) (zip)

Permanent Address: _____
(street) (city) (zip)

Home Phone: (_____) Work Phone: (_____)

Email Address _____

IN CASE OF EMERGENCY CONTACT

Name: _____ Relationship _____

Phone: Cell: _____ Home: _____

I am applying for the fall / spring / summer Semester. (Circle one)

Dates: _____

What year are you in? _____

What is your Major? _____

Email address: _____

Please identify up to four shifts with a total of at least

Day	AM	PM
Sunday		
Monday		
Tuesday		
Wednesday		
Thursday		

3784 10th Ave., New York, NY 10034

www.inhisnameunited.org

Email: info@inhisnameunited.org

INHISNAME UNITED

Friday		
Saturday		

INTERNSHIP APPLICATION FORM

Please respond to the questions below;

Why do you want to intern at Inhisname United Inc.

What are your Strengths?

Inhisname United Inc. is always looking for interns with the following skills, please identify areas that you can/or would like to contribute to

- Project management
- Editing/writing
- Event Planning/Coordinating
- Social Media
- Design (Web, invitations etc.)
- Research
- Grant Writing
- Phone Calls
- Emailing

Aside your regular inter hours will you be available to participate in Inhisname United Events (2-3+ evenings per semester) during the semester? Yes No

Please Email application for and Resume to Internships at: info@inhisnameunited.org if we feel that you are a good fit for Inhisname United Inc. you will be invited for a short interview and orientation during the beginning or in the middle of the Semester.

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