**INTERNSHIP APPLICATION FORM**

**Summer Research/Work Experience for High School Students**

Please note: We prefer applications are submitted via email. However, you can complete this application and send us a hard copy. Please remember to complete all sections of this application and send it with your transcript, resume, and a letter from your program/school indicating the purpose of internship. Please also ensure that your teacher/lecturer/Institution has submitted a letter of request to [bagopridelimited@gmail.com](mailto:bagopridelimited@gmail.com) for period of facilitation. Thank you for your interest!

**1. Contact Information**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name (Last, First, Middle): | | | | | Date: |
| Present street address: | | | City:       State:       Zip: | | |
| Home phone: | Other phone: | | | E-mail address: | |
| Are you qualified to work in the T&T for any employer for an indefinite period of time?  Yes  No  If no, please specify your status. | | Are you less than 18 years of age?  Yes  No  If you are under 18 years of age, what will your age be on June 30, 2017? | | | |
| Expected date of high school graduation: | | Please indicate the type of internship you are seeking:  Paid (rate of pay = $12.00), Service Learning (unpaid) | | | |

**2. Education**

List the schools and/or educational organizations you have attended, beginning with your most recent:

|  |  |  |  |
| --- | --- | --- | --- |
| Name of School or Organization | Location | Dates Attended | Years Completed (as of June 30, 2017) |
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|  |  |  |  |

**3. Science and Math Courses**

Provide a copy of your cumulative course and grade list as an attachment. Please include courses you will have completed by summer of 2017 (unofficial transcripts are fine).

**4. Previous Internships and Employment**

Provide a list of previous employers. Please include all paid and unpaid positions in the order they occurred. Please continue list on separate sheet of paper. If possible please obtain a letter of recommendation from previous supervisors.

|  |  |  |  |
| --- | --- | --- | --- |
| Internship or Employer | Address | Dates of Employment | Position Held |
| 1. Name: | Address: | From:       To: | Title: |
| Duties performed: | | | Contact as reference (Y/N) |
| 2. Name: | Address: | From:       To: | Title: |
| Duties performed: | | | Contact as reference (Y/N) |

**5. Research and Career Goals**

On a separate page, please describe 1) your career goals, 2) why you are interested in scientific research, 3) what interests you most about our education and curriculum related projects, and 4) why you are hoping to work at BagO Pride Limited rather than other research institutions/business/other?

**6. Educational Benefit**

Please indicate what you hope the educational benefit of this opportunity will be. List any requirements of your educational organization (for example: complete a paper, work 60 hours on a specific project, complete an assignment).

**7. Research Methods**

If you are interested or have experience in a specific technology or methodology or a specific biological model system please indicate below. Also, please list any skills relevant to the internship for which you are applying.

**8. Availability**

The Internship Program will likely begin on Monday, July 03 and end on Friday, September 03, 2017. If you are not able to attend the full program, please indicate the dates, days and times you are **not** available:

**9. References**

Please make sure you have answered Y (Yes) or N (No) to whether we can contact your former employer(s) in section 4. In addition, please include at least one letter of recommendation from a teacher or coach.

**10. Previous Convictions**

|  |
| --- |
| Have you ever been convicted of an offense related to the job for which you are applying or convicted of a crime other than a minor traffic violation in the past 7 years?  Yes  No  If yes, please explain. Conviction will not necessarily bar you from employment. |

#### 11. Application Verification

#### THIS FORM IS NOT VALID WITHOUT YOUR SIGNATURE. PLEASE READ BEFORE SIGNING: The statements above are true to the best of my knowledge.

Signature       Date