

Internship Application



Applicant Information

Last Name:	First:	Date:
Street Address:		
City:	State:	Zip
Primary Phone:	Alternate Phone:	
Email Address:		
Have you ever been convicted of a crime? ☐ Yes ☐ No		If yes please explain:
How did you hear about our internship program?		

Availability

Please check semesters of availability: Year _____		Start Date: _____		End Date: _____			
☐ Fall	☐ Spring	☐ Summer	☐ Other, please explain:				
Please check your general availability	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning							
Afternoon							
Evening							

Areas of Interest

Primary area of interest (please select only one):	
☐ Non-Profit Management	☐ Volunteer Management
☐ Therapeutic Riding Instructor	☐ Equine Management
☐ Other (Please Explain):	
Secondary areas of interest (please check all that apply):	
☐ Non-Profit Management	☐ Volunteer Management
☐ Therapeutic Riding Instructor	☐ Equine Management
☐ Other (Please Explain):	

Experience/Education

Current employment status: ☐ Full-time ☐ Part-time ☐ Not Employed	
Current or most recent paid position held:	
Are you currently a full-time student? ☐ Yes ☐ No	If yes, please indicate school:
Level: ☐ Freshmen ☐ Sophomore ☐ Junior ☐ Senior ☐ Graduate Student	Areas of study:
Do you speak any other languages? ☐ Yes ☐ No	If yes, please list the language(s) you are: Fluent: Semi-fluent: Basic:

Computer Skills/Software Used:

Please describe your experience involving people with disabilities:

If your area of interest is instructor or equine related, please list your equine/equestrian and/or teaching experience:

Personal Information

Why are you interested in an internship with Equest?

Please list three to six specific objectives you would like to accomplish through this internship.

Describe your long-term career goals:

Personal References:

1:

2:

Disclaimer and Signature	
I certify that my answers are true and complete to the best of my knowledge. If this application leads to an internship assignment, I understand that false or misleading information in my application may result in my release.	
Signature:	Date:

Please return this form with your resume to:

Equest

Attn: Internship Program

P.O. Box 171779, Dallas, TX 75217

Or email to Ellie Grant

egrant@equest.org