

Internship Application

Legacy Greenscapes hosts both High School, Bachelor's and Master's students in our agency for internships. All interns must submit a resume, complete the internship form, and be interviewed prior to being accepted.

To apply for MARKETING AND EVENTS INTERN, candidates must submit the following to Legacy Greenscapes at djackson@legacygreenscapes.org by MARCH 1, 2023 with the subject heading: LG INTERNSHIP APPLICATION.

- 1. A resume and cover letter.
- 2. A copy of this internship application.



Internship Application

APPLICANT INFORMATION

Full Name:							
		n weekends?					
If required, are you able to be present in the evenings or on weekends?							
	Yes No						
Have you ever been convicted of any crime, adjudicated guilty of any crime, or pleaded guilty to any crime (including traffic offenses)?							
	Yes No						
If you answered yes, please explain the offenses you were convicted of:							
Program(s) of Interest (please check all that apply):							
	rograms and Events	Dark Managament					
	rograms and Events nvironmental Education	☐ Park Management ☐ Park Maintenance					
	olunteer Coordination						
	undraising and Development						
_	larketing and Communications						
Computer Skills – include programs you are proficient in:							
Other s	special skills/training/abilities:						

What do	o you hope to gain from this opportunity?
I am a g	reat candidate for this internship/practicum because
My futu	re career aspirations include
Current	degrees/licensures (mark N/A if none)
ACADE	MIC INFORMATION
Academ	nic Institution Information
Academ	nic Institution attending:
Degree	working on/program:
Year in I	Program:
	Freshman Sophomore Junior
	Senior
	Graduate Level

Is an in	ternship, service-learning experience, or volunteer hours	required for your degree?			
	Yes No				
Please	select the type of learning experience for which you are	applying:			
	Internship Service Learning Experience Capstone Project Volunteer Hours				
Total #	of hours required for completion:				
Anticipated start date:					
Anticip	ated ending date:				
Faculty	Advisor/University Contact Information:				
Contac	t Name:	Phone:			
E-mail:					
Addres	s:				
an inte any info ability, other in interns	vare that any omissions, falsifications, misstatements, or rnship consideration and, if I am selected, may be ground ormation I give may be investigated as allowed by law. I demployment history, and fitness for employment by emphasized and organizations to Legacy Greenscapes. This hip if I am selected. I certify to the best of my knowledge any attachments are true, correct, and complete, and m	ds for termination at a later date. I understand that consent to the release of information about my bloyers, schools, law enforcement agencies, and consent shall continue to be effective during my and belief all of the statements contained herein			
Signatu	re:	Date:			