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: _____________________________________________

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):

☐ Programs and Events
☐ Environmental Education
☐ Volunteer Coordination
☐ Fundraising and Development
☐ Marketing and Communications
☐ Park Management
☐ Park Maintenance

Computer Skills – include programs you are proficient in:

Other special skills/training/abilities:
What do you hope to gain from this opportunity?

I am a great candidate for this internship/practicum because...

My future career aspirations include...

Current degrees/licensures (mark N/A if none)

ACADEMIC INFORMATION

Academic Institution Information

Academic Institution attending: ________________________________

Degree working on/program: ________________________________

Year in Program:

☐ Freshman
☐ Sophomore
☐ Junior
☐ Senior

☐ Graduate Level

☐ Doctoral Level

☐ Other: ________________________________
Is an internship, 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: ____________________________________________

Anticipated ending date: ____________________________________________

Faculty Advisor/University Contact Information:

Contact Name: ____________________________________________ Phone: __________________________

E-mail: ____________________________________________

Address: ___________________________________________________________________________________

I am aware that any omissions, falsifications, misstatements, or misrepresentations above may disqualify me from an internship consideration and, if I am selected, may be grounds for termination at a later date. I understand that any information I give may be investigated as allowed by law. I consent to the release of information about my ability, employment history, and fitness for employment by employers, schools, law enforcement agencies, and other individuals and organizations to Legacy Greenscapes. This consent shall continue to be effective during my internship if I am selected. I certify to the best of my knowledge and belief all of the statements contained herein and on any attachments are true, correct, and complete, and made in good faith.

Signature:____________________________________________ Date: __________________________________