



Internship Application

Name: _____ Phone: _____ E-mail: _____

Address: _____

Social Security Number: _____ DOB: _____

CA Driver's License (Must have valid CA DL): _____ Exp. Date: _____

School: _____

Program: _____

Site Requesting to Intern: _____

What program are you enrolled in? (BA, MA?, etc.)

When will the internship begin and when will it end?

What are the requirements for supervision (licensed supervisor? or any qualified supervisor)

How many hours do you would need? (total and per week)

What type of "work activity do you need? (working with certain number of clients? groups? intake?)

What days and times will you be available to intern?

BRIDGES, Inc. is governed by Community Care Licensing which requires all staff and volunteers to be cleared by a Criminal Background check. If you have already gone through a background check and have been cleared by the Department of Justice there is a possibility you may **NOT** be cleared through Community Care Licensing's system in which case you will need to be LIVE SCANNED again. The background check LIVE SCAN is at a personal cost of \$84.00

Would you be comfortable paying the above mentioned amount?

Community Care Licensing also requires that all staff and volunteers be clear of Tuberculosis. You will need to obtain a TB test at a personal cost. If you have had a TB test recently, it will need to have been within 90 days of your internship start date.

Would any of the above mentioned be an issue?