



INTERNSHIP QUESTIONNAIRE

YOUTH & FAMILY SERVICES

PO Box 2813

Rapid City, SD 57709-2813

Phone: (605) 342-4195

Please complete the following questionnaire below. In combination with your two-paragraph internship ideas and expectations, this will help us to better place you in an internship.

Date Available: _____

Last Name: _____ First: _____ Middle: _____

Address: _____ City _____ State: _____ Zip: _____

Phone: Home () _____ Work () _____ Cell () _____

Have you ever been employed/or volunteered with YFS (formerly Girls Club Inc)? Yes ____ No_ If yes, name at time of employment _____ Dates of employment: ____ to ____

If the position requires driving, do you have a valid driver's license? Yes ____ No ____ If yes, please list your driver's license information. State _____ Number: _____

Area of Interest:

- | | |
|--|--|
| <input type="checkbox"/> Rapid City Prenatal to Five Head Start | <input type="checkbox"/> Rural Prenatal to Five Head Start |
| <input type="checkbox"/> Girls Inc | <input type="checkbox"/> Counseling Center |
| <input type="checkbox"/> Western Prevention Resource Center | <input type="checkbox"/> Male Advocacy Network |
| <input type="checkbox"/> FCC Nutrition Program | <input type="checkbox"/> Child Care |
| <input type="checkbox"/> Administration (Finance, HR, IT, Public Relation/Development) | |

Major and expected year of graduation:

Relevant coursework:

Relevant extracurricular activities:

Internship Ideas and Expectations: