

Internship Application

GENERAL INFORMATION

Name:		Email:	
Phone:		Date of Birth:	
Address:			
City:		State:	ZIP Code:

EDUCATION AND SKILLS (please circle or fill in)

Are you currently enrolled in school? Y N		School:	Program:
Are you a recent graduate? Y N		Graduation Month/Year:	Degree/Certification:
List any other certificates held (ex. Phlebotomy, Medical Assisting):			
Are you a student desiring to meet clinical requirements for pre/post graduate programs and/or applications? Y N			
How many clinical hours are you required to have?		Are you bilingual? Y N language/fluency:	
Do you have volunteer healthcare experience? Y N If so, where?			

AVAILABILITY

GS internships are for one academic semester. This can be extended if mutually beneficial.

What is your available start date?		What is your projected end date?			
What is your availability? (please circle below)					
Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning	Morning	Morning	Morning	Morning	Morning
Afternoon	Afternoon	Afternoon	Afternoon	n/a	n/a

TO WHICH INTERNSHIP PROGRAM ARE YOU APPLYING?

Medical Intern	Nonprofit Management
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FUTURE PLANS

Are you pursuing a career in health care (circle)? MD/DO PA NP RN Other: _____ Unsure

EMPLOYMENT HISTORY

Employer	Month/Year – Month/Year	Job Title

PREVIOUS EXPERIENCE

Please list any past experience working or volunteering in nonprofit organizations.

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NARRATIVE

What motivated you to apply for an internship at Good Samaritan? Tell us how you plan to add value supporting our mission.

How would an internship with us move you toward fulfilling your career or life goals?

Please share with us any additional information you feel would assist us in the application process.

REFERENCES

(Please provide one academic and one personal reference)

Name	Relationship	Phone

SIGNATURE

Signature of applicant:

Date:

To the best of my knowledge and belief, the information given truly represents my background and experience.

Please return this application to
Bianca Long, Development & Volunteer Coordinator
 (P) 678-553-4934 ■ bianca.long@goodsamatlanta.org
 1015 Donald Lee Hollowell Parkway Atlanta, GA 30318

Applications will be reviewed by the Good Samaritan team as an initial screening. Candidates who are selected for an interview will be contacted directly. If you are not contacted by a member of our team within 3 weeks of your application, please consider applying again in future program years. Due to a high number of applicants, only those selected for an interview will receive follow up correspondence. Thank you for thinking of Good Sam!