



Intern Application

Applications are to be completed in full by the applicant themselves and returned to our office now.

Please send applications to:
P.O. Box 352, Granite Springs, NY 10527
or email to info@summertrailsdaycamp.com

Name: _____

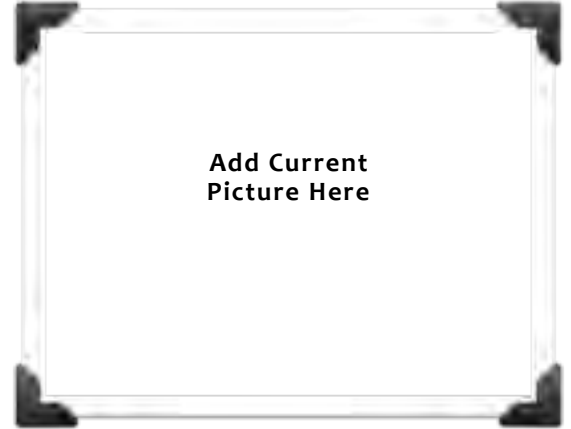
Address: _____

Home Phone: _____

Cell Phone: _____

E-mail Address: _____

Years at Camp: _____



Please list any clubs, organizations, or teams you have been a member of over the last 2 years. _____

Describe a Leadership Role you have held outside of Summer Trails _____

As a camper at Summer Trails, which staff member had the greatest influence on you? What traits and or characteristics did they have that made them so successful in your eyes? _____

Why do you want to be an Intern at Summer Trails? What do you hope to gain from the experience?

Interns are not campers - they have increased responsibility! In this program, Interns work with each other, as well as the Intern Director, Camp Directors and Leadership Staff and staff at large. We are all a team, and this means each person has to show lots of responsibility. If you were going to prove that you were a responsible person, what characteristics would you portray? Please give an example of a time when you had to show responsibility.

**Please list two references for us to contact.
References should be teachers, coaches, employers, or supervisors (not friends or relatives).**

Reference Name: _____	Reference Name: _____
Relationship: _____	Relationship: _____
Phone Number: _____	Phone Number: _____
Email: _____	Email: _____

I certify that I, the Intern Applicant has completed this application myself and that all of the statements and information is accurate and complete. I understand that acceptance into the Intern Program is based on a variety of factors including this application.

Applicant Signature _____ Date _____

_____ office use only _____
Application received date _____ Interview Date _____

Notes: