

INTERNSHIP APPLICATION

Position Number	:	Position Title:		Application Date:
Name:	First	Middle	Student ID Num	nber:
Local Address:			City/State/Zip:	
UCD Email:		@ucdavis.edu	Phone Number:	
Class Level:	Freshman	☐ Sophomore	☐ Junior	Senior
Major(s)/Minor(s):	·		A	verage units per Qtr:
Are you work-stud	y eligible?	□ No Are you	in good academic standing	?? Yes No
		, if under 18, you mus University. Do you m	-	school or have a valid work
Have you ever bee	,		t or resigned to avoid such	<u> </u>
quarter to conduct	informational session			LL-sponsored events which

Why do you have an interest in this position? (650 character limit)
What skills, knowledge, qualities or experience do you have that would make you a good candidate for this position? (650 character limit)
Describe your experience with facilitating peer-to-peer educational workshops and developing learning programs and/or activities. (650 character limit)
Why do you believe students should be involved in leadership and professional development training? (650 character limit)
Are you involved in any activities on campus? If so, which ones? (650 character limit)

Name:	Po	osition:
Company/ Department:		
Phone:	Email:	
Name:	Po	osition:
Company/ Department:		
Phone:	Email:	
y certify that the information lis	sted above is true and accurate.	
re:	_	ate:

Please provide information for TWO references who can speak to your skills, work/volunteer experience and

professionalism:

Students applying to this position <u>cannot hold another paid campus position</u>. Applicants <u>MUST</u> submit an internship application <u>AND</u> copy of a current resume via email or in person by 5:00pm on Wednesday, March 29, 2019 to:

Christie Navarro, Director Center for Leadership Learning 1350 The Grove

Email: cdnavarro@ucdavis.edu