



Kentucky Refugee Ministries - Lexington

INTERNSHIP APPLICATION

GENERAL INFORMATION

Today's Date: _____

Name: _____ Date of Birth: ____/____/____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____

Email: _____

Occupation: _____

Do you have transportation? YES NO

If yes, can you transport clients in your vehicle? YES NO

Are you comfortable with utilizing public transit if trained to do so? YES NO

INTERNSHIP PREFERENCES

After reviewing the list of internships at <https://kyrm.org/careers/>, please list your top three internship placement choices.

1. _____

2. _____

3. _____

Name/Contact of Institution/Program (if any):

Hours desired per week

Hours desired per week

Are you a practicum student? YES NO

AVAILABILITY

Please select all that apply:

	Morning 8:00-12:00	Afternoon 12:00-5:00	Evening After 5:00
Mon.			
Tues.			
Wed.			
Thurs.			
Fri.			
Weekend			

Approximate Start Date: _____

Approximate End Date: _____

Hours desired per week: _____

BACKGROUND

How did you hear about us?

Language Skills (i.e., Spanish, beginner):

Do you have any special skills or interests (i.e. carpentry, graphic design, working with children, TESL certified, special event experience, sports)?

Please return this completed application along with a resume and cover letter to internships@krmlx.org.

