



STUDENT INTERN APPLICATION

Name _____

Address _____

Phone Number _____ Work _____ E-mail _____

School Attending _____

Program _____

Degree Seeking _____

College/University Supervisor _____

Program Supervisor _____

When does your internship Begin _____ End _____

Briefly describe the requirements that you must fulfill during your internship (hours, case notes, case presentations, tapes, etc.).

Please describe your interest in completing your internship at Jessie's Place.



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What issues are you comfortable working with?

What issues are you uncomfortable working with?

What clients are you open to working with? (Circle)

Group Family Adolescents Individuals Children

What days and evenings are you available? (Please list all times that you do not have other regularly scheduled conflicts-you will not be scheduled for all times listed)

Monday Tuesday Wednesday Thursday Friday

What do you hope to gain through your internship experience?

Please give a brief description of your feelings about working with an organization governed by Judeo Christian principles.



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Has a civil lawsuit or criminal action ever been filed against you for your professional work or is any such action pending? Yes _____ No _____

Have you ever been asked to resign or been terminated by a training program or employer? Yes _____ No _____

Have you ever been convicted of a felony? Yes _____ No _____

Have you ever had a license revoked? Yes _____ No _____

Have you ever been disciplined in any way or released from a place of employment for a breach of ethical conduct? Yes _____ No _____

Have you ever struggled with or been treated for mental illness? Yes _____ No _____

Have you ever struggled with or been treated for substance abuse problem? Yes _____ No _____

If you answered yes to any questions, please submit a detailed explanation, including evidence of the matters disposition.



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Consent Statement

“All of the information in this application is true to the best of my knowledge. I understand that any misstatement, omission, or distortion may be cause for denial of appointment or for summary dismissal from this agency.”

“I authorize Jessie’s Place to consult with past and present employers, supervisors, and schools about my competence, character, and ethical qualifications. I release from liability this agency and its duly authorized representatives for all actions performed in good faith in the evaluation of my application and background. I also hold harmless all individuals and organizations who provide information to this agency in good faith concerning my professional competence, ethics, character, and other qualifications. I agree to notify this agency of any changes in my job or training status, licensure, censor or sanction by professional bodies or any other information relating to my ability to perform my job at this agency.”

Signature _____

Print Name _____

Date _____



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Statement of Faith

At Jessie's Place of Jimmie Hale Mission, the following is our statement of faith.

1. We believe the Scriptures of the Old and New Testament to be the Word of God, the only infallible rule of faith and practice.
2. We believe in God, eternally, existing in three persons: Father, Son, and Holy Spirit.
3. We believe that Jesus Christ is the only begotten Son of God, conceived by the Holy Spirit, Born of the Virgin Mary, and is true God and true man.
4. We believe that man was created in the image of God; that he sinned and thereby incurred not only physical death but also spiritual death, which is separation from God; and that all human beings are born with a sinful nature, and, in the case of those who reach moral responsibility, become sinners in thought, word and deed.
5. We believe biblical marriage between one man and one woman and that gender is a biological reality determined and documented at birth.
6. We believe that the Lord Jesus Christ died for our sins, according to the scriptures, as a representative, substitutionary and complete sacrifice; and that all who believe in Him are justified on the grounds of His shed blood.
7. We believe in the physical resurrection of the crucified body of our Lord, in His ascension into Heaven, and His present life there for us as High Priest and advocate providing a sufficiency for body, soul, and spirit for the believer.
8. We believe in the personal, visible and second coming of our Lord Jesus Christ, at a time unknown to us, but for which we are watching.
9. We believe that all who receive by faith the Lord Jesus Christ and are born of the Holy Spirit thereby become children of God, and there is no other way to salvation.
10. We believe that the believer should be a vessel sanctified for the Master's use.
11. We believe in the great commission which our Lord has given to His church to evangelize the world, and that this evangelization is the great mission of the church. Furthermore, we believe that it is our Christian duty to witness by word and deed to these truths.
12. We believe in the bodily resurrection of the just and the unjust, the everlasting conscious punishment of the lost, and the everlasting blessedness of the saved.

Signature: _____ Date: _____

Witness: _____ Date: _____



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Consent for Background Check

I, _____, authorize **Jessie's Place of the Jimmie Hale Mission (The Mission)** to conduct an independent investigation of my driving record (MVR), background, police, and criminal history record information pertaining to me, which may be in any state or local criminal justice agency in the United States, and all public records for the purpose of confirming the information provided to **The Mission**.

I release **The Mission** and/or its agents and any person or entity that provides information pursuant to this authorization from any and all liabilities, claims, or law suits in regards to the information obtained from any and all of the above referenced sources used. I further understand that **The Mission** and its agents will adhere to applicable state and federal statutes concerning the securing of information, handling, and release of the information obtained.

The following is my true and complete legal name. All information on this document is true and correct to the best of my knowledge:

Full Name- Printed _____

All Other Names Ever Used (Include Maiden Name and Names from Previous Marriages):
Requested to put the approximate years of each name used to insure that the correct name is used at each previous location. Otherwise, the verification process may be delayed.

7 Years Address History

Present Address _____ City/State/Zip _____ How Long? _____

Former Address _____ City/State/Zip _____ How Long? _____

Former Address _____ City/State/Zip _____ How Long? _____

_____/_____/_____
Date of Birth Social Security No. Driver's License No. State of Driver's License

Signature _____ Date _____

Office Use Only

*Fax to ADM & Associates Inc. at: 888-811-8861 (Phone: 800-242-5999 Email: ernest@admassoc.com)
For administrative questions, contact Lona Evans at 800-242-5999 or (after hours) 266-7401 or lona@admassoc.com.*

Background Check Sent by: Staff Initial: _____ Date: _____ Time: _____
Background Check Findings: Registered Sex Offender: Yes _____ No _____
Issue: _____ Date: _____ Resolution: _____
Issue: _____ Date: _____ Resolution: _____
Issue: _____ Date: _____ Resolution: _____

Intern: Approved _____ Denied _____ Staff Signature: _____ Date: _____