Purpose: To provide career development, training, and employment opportunities to young adults during the summer.

Process: Young adults will complete a short term paid work experience/internship in a Martin County business.

- Education
  - Interest and Skills Assessment
  - Assist in the development of your job duties at your summer job placement
  - Alignment of your career interests with established Martin County businesses

- Once you are selected for the Martin County Internship Program:
  - Your career interests will be matched with that of a Martin County business.
  - You will submit a resume to the business.
  - You will interview at a business for acceptance into the work experience/internship.
  - If accepted an orientation will be completed and you will work with new employer to develop the job duties and performance standards unique to your internship.

Payoff:
- Students will gain valuable experience at a Martin County business.
- Students will gain insight into the leadership and career possibilities in Martin County.
- Successful completion of work experience will result in legitimate work experience for your resume.
- Coordinate your own transportation for getting to work.
- Effectively become a part of workplace team.

Eligibility:

- Young adult students ages 18-24
- Be a resident of Martin County.
- Young adults must be eligible to work in the U.S.
- Must be in good academic standing.

This is a voluntary program.

Selected young adults will be will meet with an MVAC Career Counselor regularly, and will follow through with MVAC’s and their employers requirements.

<table>
<thead>
<tr>
<th>Application Check List</th>
</tr>
</thead>
<tbody>
<tr>
<td>Complete the attached application. Be sure to fill in EVERY blank on EVERY page.</td>
</tr>
<tr>
<td>Staple a copy of your Social Security Card to the application.</td>
</tr>
<tr>
<td>Staple a copy of your Driver’s License or MN ID or Student ID to the application.</td>
</tr>
<tr>
<td>Sign and date all of the forms.</td>
</tr>
</tbody>
</table>
Please write a short paragraph telling us why you are interested in being in MVAC/Martin County’s internship Program.
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Have you decided what you would like to do for your future career?  Yes___  No___  Please describe.
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What is your educational/career plan; and where are you attending school?
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To which communities in Martin County do you have transportation to attend work experience/job?
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WORK HISTORY

Current or Most Recent Employer: __________________________ Supervisor __________________________ Phone ____________
Job Title: ____________________________________________  Number of Hours Per Week: _______  Pay Rate: ______________
Job Duties: __________________________________________
Start Date: _______________  End Date: _______________  Reason for Leaving: __________________________

Previous Employer: ____________________________________ Supervisor __________________________ Phone ____________
Job Title: ____________________________________________  Number of Hours Per Week: _______  Pay Rate: ______________
Job Duties: __________________________________________
Start Date: _______________  End Date: _______________  Reason for Leaving: __________________________
## MVAC/Martin County Internship Program

**NAME:**  
_Last_  
_First_  
_Middle_

**SOCIAL SECURITY NUMBER:**  
**DATE OF BIRTH:**  
**AGE:**  
**GENDER:**  
- [ ] Male  *Note: Males, 18 yrs and older must register with Selective Service*  
- [ ] Female

**ADDRESS:**  

<table>
<thead>
<tr>
<th>Street</th>
<th>PO Box or Apt #</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
</tr>
</thead>
</table>

**COUNTY:**  
**EMAIL ADDRESS:**

**CELL PHONE:**  
**CELL PHONE COMPANY:**

Check here if OK to send text messages to this number [ ]

**HOME PHONE:**

**EMERGENCY CONTACT INFORMATION:**

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Phone</th>
</tr>
</thead>
</table>

**PERSONAL/PROFESSIONAL REFERENCES:**

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Phone</th>
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**CERTIFICATION STATEMENT:**

I certify that the information provided is true to the best of my knowledge, and that it may be subject to review and verification. I have read the information regarding parental permission and releases and agree to its content.

SIGNATURE______________________________________DATE: _________________

Reviewed by MVAC staff:________________________Date:______________________

Accepted: YES_______ Date:______________________

Date:___________

Notified Youth: YES_______ Date:_____________