

Summer Youth Internship Application

Applicant Information

Full Name: _____ DOB: _____
Last First M.I. Month / Day / Year

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email: _____

Do you have your driver's license? YES NO Will you have access to a car this summer? YES NO

Driver's License Number: _____ Years Licensed: _____

State: _____ Expiration Date: _____
Month / Day / Year

Has your license ever been suspended? YES NO

How many accidents? _____ How many moving violations? _____

Education

High School: _____ Address: _____

Did you graduate? YES NO Graduation Year: _____

College: _____ Address: _____

Degree: _____ Did you graduate? YES NO Graduation Year: _____

If you did not graduate, are you currently enrolled at this institute? YES NO

Other: _____ Address: _____

Degree: _____ Did you graduate? YES NO Graduation Year: _____

If not a student, are you currently employed? YES NO

References

Please list three references: 1 pastoral, 1 professional, & 1 personal (Professional reference should be a supervisor, mentor, or professor)

Name of Pastor: _____ Years Known: _____
Full Name

Relationship: _____ Phone: _____

E-mail Address: _____

Name of Professional: _____ Years Known: _____
Full Name

Relationship: _____ Phone: _____

E-mail Address: _____

Name of Personal: _____ Years Known: _____
Full Name

Relationship: _____ Phone: _____

E-mail Address: _____

Church Background

Please briefly share your Christian testimony:

Current Church: _____ Member? YES NO

City, State: _____ Pastor: _____

Do you attend church regularly? YES NO

Have you worked in youth ministry before (as a youth intern, high school staff, etc.)? YES NO

If yes, please elaborate on your ministry experience below:

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Name (Printed): _____

Signature: _____ Date: _____

Instructions for Submission

Once completed, in its entirety, attach all additional materials and submit by email. Please email the Shady Grove Presbyterian Church Office: office@shadygrovepca.org

Upon receiving your application, we will reach out to you. If you have any questions please reach out to Bruce Wiley, the Youth Pastor at Shady Grove, by email: hiwileys2@verizon.net or by phone at: 301-928-4620

We look forward to hearing from you!
In Christ,
Cornerstone Youth Staff