

Volunteer/ Internship Application



40 Education Sciences Building
 56 E River Road
 Minneapolis, MN 55455

Office: 612-625-3021
 Fax: 612-625-0704
<http://www.cehd.umn.edu/trio/upward-bound/default.html>
 Email: ubtrio@umn.edu
 UB HR Contact: echa0001@umn.edu

Position: <input type="checkbox"/> Office Clerical <input type="checkbox"/> Office Human Resources Development Training <input type="checkbox"/> Office Human Resources Development Organization Development <input type="checkbox"/> Human Resources Management <input type="checkbox"/> Teaching Assistant <input type="checkbox"/> Tutor <input type="checkbox"/> Residential Assistant <input type="checkbox"/> Other _____			
Last Name	First	Middle	Preferred Name
Home Address	City	State	Zip Code
Internship/ Volunteer (circle one)	Position (applying for)	If Intern how many hours needed?	Major
Preferred Phone	Secondary Phone	Gender: Male/Female (circle one)	Date of Birth
E-Mail Address	Emergency Contact Name and Phone Number		
Education (highest level completed) Grades 1-5 6-8 9-12 College Business Graduate School Technical/Vocational Current in college			
Work Experience: (Include both paid and volunteer work experience beginning with the most recent)			
Employer/ Organization		Address	Phone
From	To	Supervisor's Name	Your Title
Employer/ Organization		Address	Phone
From	To	Supervisor's Name	Your Title
Employer/ Organization		Address	Phone

From	To	Supervisor's Name	Your Title
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Availability							
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							
How does the mission of TRIO Upward Bound connect to your personal and/or professional values?							
What contributions do you hope to make to TRIO Upward Bound and what do you expect to get out of this experience?							

I hereby agree to serve any client who is assigned regardless of race, sex, creed or national origin. This application is true and correct the best of my opinion.

Volunteer/ Intern: _____

Date: _____