



Connecticut State Department of Education

College Internship Application

BHR-11 Revised 2/2/2017

CSDE Use Only
Accepted Internship Offer: <input type="checkbox"/> Yes <input type="checkbox"/> No
Date: _____
Location: _____

Print legibly or type unless otherwise noted. Please note: all internships are UNPAID.

Part I: Applicant Information

Name:		
Home Address:		
City/Town:	State:	Zip Code:
Home Phone:	Cell Phone:	
Permanent E-mail Address:		
College/University Name:		
Address:	School E-mail:	
City/Town:	State:	Zip Code:
Address to where notification letter should be sent: <input type="checkbox"/> Home <input type="checkbox"/> School		

Part II: Field of Study Information

Field of study:			
Expected Graduation Date (MM/YY):			
Course Instructor Name:	Instructor Title:		
Course Instructor Phone:			
Current level:	<input type="checkbox"/> Junior	<input type="checkbox"/> Senior	<input type="checkbox"/> Master's Program <input type="checkbox"/> Doctoral Program
Please identify areas of interest:			

Part III: Intern Information

Required attachments: 1) a list of all coursework, directly relevant to the content of this internship, completed prior to beginning this internship and 2) a current resume.

How many hours are you willing to commit to this internship?	per week (minimum 8)
Expected dates of participation (MM/DD/YY): Beginning Date:	End Date:
Are you applying for college credit for this internship?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have a driver's license?	<input type="checkbox"/> Yes <input type="checkbox"/> No License Number:
Would you be willing to travel to various field locations?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you fluent in a language(s) other than English?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, specify language(s):	

Part IV: Optional Information

We are requesting that you voluntarily supply the following information.

Gender:	<input type="checkbox"/> Male	<input type="checkbox"/> Female		
Ethnicity:	<input type="checkbox"/> White	<input type="checkbox"/> Black	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Asian or Pacific Islander
	<input type="checkbox"/> American Indian or Native Alaskan	<input type="checkbox"/> Other		

Part V: Convictions/Criminal History

Have you ever been CONVICTED of an offense against criminal or military law, or are there criminal charges currently pending against you? (Exclude minor traffic violations or any offense settled in juvenile court or under a youth offender law.) Yes No

If you answered "Yes", please provide a detailed explanation below about the nature of the conviction, degree of rehabilitation and time since release. Attach an additional sheet of paper if necessary.

Special Note: You are **not** required to disclose the existence of any arrest, criminal charge or conviction, the records of which have been erased pursuant to Connecticut General Statutes § 46b-146, 54-76o, or 54-142a. If your criminal records have been erased pursuant to one of these statutes, you may swear under oath that you have never been arrested. Criminal records that may be erased are records pertaining to a finding of delinquency or that a child was a member of a family with service needs (C.G.S. § 46b-146), an adjudication as a youthful offender (C.G.S. § 54-76o), a criminal charge that has been dismissed or nolle, a criminal charge for which the person has been found not guilty or a conviction for which the person received an absolute pardon (C.G.S. § 54-142a).

Part VI: Application Certification

The applicant must sign this part. An application will be considered incomplete unless the required signature is provided.

The completion and submission of this application shall not create an employee-employer relationship and does not entitle the intern to any form of compensation, remuneration, benefits or worker’s compensation payments.

“I certify that the information on this application is correct. I authorize the Connecticut State Department of Education (CSDE) to call my course instructor to obtain information pertinent to my responsibilities as an intern at the CSDE. I agree to abide by the policies, directives and laws of the CSDE.”

Signature of Applicant (Required)

Date

Name of Applicant (print or type)

Title (if applicable)

Part VII: Emergency Contact

Name: _____

Relationship Type: Spouse Parent Sibling Friend

Work Phone: _____ Cell Phone: _____

Please submit completed College Intern Application Form to:

Chris Beloff, Bureau of Human Resources
Connecticut State Department of Education
450 Columbus Boulevard, Suite 403
Hartford, CT 06103
E-mail: SDEIntern@ct.gov

The State of Connecticut Department of Education is committed to a policy of equal opportunity/affirmative action for all qualified persons. The Department of Education does not discriminate in any employment practice, education program, or educational activity on the basis of **race, color, religious creed, sex, age, national origin, ancestry, marital status, sexual orientation, gender identity or expression, disability (including, but not limited to, intellectual disability, past or present history of mental disorder, physical disability or learning disability), genetic information, or any other basis prohibited by Connecticut state and/or federal nondiscrimination laws. The Department of Education does not unlawfully discriminate in employment and licensing against qualified persons with a prior criminal conviction.** Inquiries regarding the Department of Education’s nondiscrimination policies should be directed to:
Levy Gillespie, Equal Employment Opportunity Director/American with Disabilities Act Coordinator, Connecticut State Department of Education, 450 Columbus Boulevard, Hartford, CT 06103. Phone 860-807-2071.
E-mail Levy.Gillespie@ct.gov.