



Spartanburg County Foundation

Spartanburg County Foundation Intern Application

Applicant Information		
Last Name	First	Date
Street Address		Apt/Unit
City	State	Zip
Phone	Cell Phone	
Email address:		
Have you ever been convicted of a felony?		If yes please explain:
<input type="checkbox"/> Yes <input type="checkbox"/> No		
How did you hear about our internship program?		

Please check your general availability	Monday	Tuesday	Wednesday	Thursday	Friday
Morning (approx. 9-1)					
Afternoon (approx. 1-5)					

Areas of Interest	
Please indicate which area interests you:	
<input type="checkbox"/> Accounting <input type="checkbox"/> Communications <input type="checkbox"/> Grantmaking/ Special Initiatives <input type="checkbox"/> Administrative	
Experience/Education and Skills	
Current employment status: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Not Employed	
Current or most recent paid position held	
Are you currently a full-time student? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please indicate school and concentration:
Level <input type="checkbox"/> Freshmen <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior <input type="checkbox"/> Graduate student	Areas of study:
Do you speak any other languages? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please list language <input type="checkbox"/> Fluent <input type="checkbox"/> Semi-Fluent <input type="checkbox"/> Basic
Computer Skills/Software Used:	

Personal Information

Why are you interested in an internship in an internship at The Spartanburg County Foundation?

What specific experience would you like to gain through this internship?
Describe your long-term career goals:

Professional References	
Name	Relationship and contact info (e-mail and/or phone number)

Disclaimer and Signature	
I certify that my answers are true and complete to the best of my knowledge. If this application leads to an internship assignment, I understand that false or misleading information in my application may result in my release.	
Signature:	Date:

Please complete the application and return it, along with a cover letter and resume, to:

Internship Program
 The Spartanburg County Foundation
 424 E. Kennedy Street
 Spartanburg, SC 29302

You may also email applications, along with a resume and cover letter, to Neili Akridge
nakridge@spcf.org.