



## Keystone State Games

PO Box 1166, Wilkes-Barre, PA 18703-1166 \* Phone 570-823-3164  
You may submit via Email: [ocostello@keystonegames.com](mailto:ocostello@keystonegames.com) or mail to  
Keystone State Games, Inc. PO Box 1166, Wilkes-Barre, PA 18703-1166  
Website: [www.keystonegames.com](http://www.keystonegames.com)

### Application for Internship

(Must be Typed)

#### Part I.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contact information: School E-mail: \_\_\_\_\_

NON-School E-mail: \_\_\_\_\_

Cell phone: (    ) \_\_\_\_\_ Day phone: (    ) \_\_\_\_\_

Gender: \_\_\_ Male or \_\_\_ Female Birth Date: \_\_\_/\_\_\_/\_\_\_

#### Part II.

Intern position desired: (Check applicable)

\_\_\_ Media & PR, \_\_\_ Sport Operations, \_\_\_ Financial Mgmt, Other: \_\_\_\_\_

Internship semester: Jan-May \_\_\_\_\_ May-Aug \_\_\_\_\_ Aug-Dec \_\_\_\_\_

#### Part III.

College/University: \_\_\_\_\_ Graduation Date (exact): \_\_\_\_\_

Major: \_\_\_\_\_ Minor: \_\_\_\_\_ G.P.A. overall: \_\_\_ G.P.A. Major: \_\_\_\_\_

Degree: \_\_\_ BS/BA or \_\_\_ Masters

Internship Coordinator / Supervising Professor: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: (    ) \_\_\_\_\_

Mailing address: \_\_\_\_\_

For your college, are there minimum or maximum requirements?

What are the minimum hours worked per week \_\_\_\_\_ What are the minimum number of weeks? \_\_\_\_\_

Are you doing this for Academic Credit? \_\_\_ Yes or \_\_\_ No If not, can you? \_\_\_ Yes or \_\_\_ No

Are you taking this internship as a graduation requirement? \_\_\_ Yes or \_\_\_ No

Will you be taking classes while doing this internship? \_\_\_ Yes or \_\_\_ No

If yes, is it ONLY an ON-Line Class? \_\_\_ Yes or \_\_\_ No

**Part IV.**

**Computer skills: (0=never used; 1=played with; 2=used for one project; 3=used frequently; 4=expert)**

**Basic**

MS Word \_\_\_\_\_

MS Excel \_\_\_\_\_

MS Access \_\_\_\_\_

Adobe Acrobat \_\_\_\_\_

**Graphics**

Illustrator \_\_\_\_\_

PageMaker \_\_\_\_\_

Publisher \_\_\_\_\_

In-design \_\_\_\_\_

**Website Development:**

MS Front Page \_\_\_\_\_

HTML Code \_\_\_\_\_

Quark \_\_\_\_\_

Photoshop \_\_\_\_\_

**Other Software:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Part V.**

**Will you be working another job while doing this internship? \_\_Yes or \_\_No**

**Are you expecting to be paid? If so, how much? \_\_\_\_\_**

**What is the earliest that you can begin (Exact Date required)? \_\_\_\_\_**

**What is the latest day you can work until (Exact Date required)? \_\_\_\_\_**

**Are you able to work at least 40 hours a week M-F and weekends? \_\_\_\_\_**

**If not, what can you work? \_\_\_\_\_**

**Do you have any problems calling on people to ask for services, money or to register for a program?**

**\_\_Yes or \_\_No**

**Activities/interests: \_\_\_\_\_**

**List Special skills, abilities or certificates: \_\_\_\_\_**

**What are your qualifications to work as an intern at the Keystone State Games?**

**What do you expect to learn and experience at the Keystone State Games?**

**Previous volunteer and Non-profit experience:**

**Do you have current certifications or licenses of any of the following?**

- CDL (Commercial Truck Drivers License)\_\_\_\_\_
- Basic First Aid CPR Certification \_\_\_\_\_
- Advanced First Aid CPR \_\_\_\_\_
- Other Medical Training \_\_\_\_\_ List \_\_\_\_\_
- Sports expertise \_\_\_\_\_ List \_\_\_\_\_
- Other special training: \_\_\_\_\_

**Part VI:**

Please list three to five References that can attest to your character, work ethic, integrity and skills. Only one can be from a professor. **Must have email address!**

1) Full Name: \_\_\_\_\_ Relationship to yourself: \_\_\_\_\_

Email address: \_\_\_\_\_ Daytime telephone number: (    ) \_\_\_\_\_

2) Full Name: \_\_\_\_\_ Relationship to yourself: \_\_\_\_\_

Email address: \_\_\_\_\_ Daytime telephone number: (    ) \_\_\_\_\_

3) Full Name: \_\_\_\_\_ Relationship to yourself: \_\_\_\_\_

Email address: \_\_\_\_\_ Daytime telephone number: (    ) \_\_\_\_\_

4) Full Name: \_\_\_\_\_ Relationship to yourself: \_\_\_\_\_

Email address: \_\_\_\_\_ Daytime telephone number: (    ) \_\_\_\_\_

5) Full Name: \_\_\_\_\_ Relationship to yourself: \_\_\_\_\_

Email address: \_\_\_\_\_ Daytime telephone number: (    ) \_\_\_\_\_

I acknowledge that providing false information on this application can be construed as fraud and can have very serious ramifications. By placing my initial on the line below, I certify that all of the information is complete and truthful. \_\_\_\_\_

**Previous work experiences: PLEASE ATTACH RESUME**