Seed Summer Art Camp

Intern Application 2024

Student Name:	Grade Level Comple	eted as of June	2024:	Birth Date:		Gender:
Parent or Guardian:		Parent or Guardian:				
Home Address:		Home Address:				
City & Zip Code:		City & Zip Code:				
Home Phone: Cell Phone:		Home Phone	one: Cell Phone:			
Work Phone:		Work Phone:				
E-Mail Address:		E-Mail Address:				
Write a paragraph explaining why y	ou want to be a summer	r intern. Includ	de what you hav	e to offer to th	e program as	an intern:
List your strengths/challenges as	s an intern:					
I understand that my responsibility	as an intern is to be of s	onvice to the A	wakaning Saad	summer prog	ram while gain	ing valuable
experience with children. I underst			_		_	_
whatever classroom I am most need		33.6.1.04 1119 1113	e erroree, arra ra	151 CC 10 do 111y	meernomp erre	.c.runy irr
			All intern applications must be received by May 15 to be			
intern signature		date	considered tor	summer placeme	ent.	
Indicate your top three preferences for y	our intern placement		Indicate	the weeks you	would like to a	attend
Toddler 1s/2s				Week 1	June 3 - 7	
Preschool 3s	\$150 weekly Rate		(NI II 16	Week 2 Week 3	June 10 - 14	
Preschool 4s/5s K - 1	50% Deposit due with Remaining balance d		(No school June 19	Week 4	June 17 - 21 June 24- 28	+
2nd - 6th*	Remaining balance a	ide May 15111	(No school July 4)	Week 5	July 1 - 5	
Adult T-shirt size: (cirlce) XS S M L	XL		WILD	Week 6	July 8 - 12	
			Weekly Rate	# of weeks	Total = \$	50% Depsosit
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For office use only:						
Date Deposit Paid: Class assignment:	Notes:					