



Clovis Community College Student Services
 10309 N. Willow Avenue, Fresno, CA 93730 ~ (559) 325-5320

APPLICATION FOR COUNSELING INTERNSHIP

Ms. Mr.

Miss Dr.

Mrs.

Last Name

First

Middle or Initial

Present mailing address _____

Number and Street

City

State

Zip Code

Telephone _____

Home

Cell

Other (please describe)

Email _____

POSITION TITLE _____

Clovis Community College Center Counseling Intern

CALIFORNIA COMMUNITY COLLEGE CREDENTIALS:

TYPE HELD

SUBJECT

DATE ISSUES/DATE EXPIRED

VALID FOR LIFE

NOTE: California Community College Credentials are no longer available and are no longer required but may be substituted for minimum qualifications.

Equal Opportunity Employer
 American Disabilities Act Compliant

PERSONAL DATA

Have you ever been convicted, pled guilty to or pled no contest to any criminal offense by any court? (Having a criminal record does not necessarily disqualify you for employment. Each case is given individual consideration, based on job-related criteria.) Yes No

If Yes, please note the date and place of each offense, the specific charge, the date and place of convictions, or plea, the fine or sentence received or the diversion program entered. You may omit any offenses for which the only punishment imposed was a fine of less than \$100, or minor traffic violations. Any offense for which you were convicted for which the punishment was a fine in excess of \$100, which required serving a jail or prison sentence, or which required probation **MUST** be reported **or your application will be considered incomplete**. You must report convictions or pleas withdrawn, set aside or dismissed pursuant to California Penal Code section 1203.4. Notwithstanding any of the preceding, you should not disclose convictions that are over two years old as of the date that you complete this application for violation of health and safety code sections 11357, 11360, 11364 or 11365 as those statutes related to marijuana prior to January 1, 1976 or a statutory predecessor to those statutes.

Have you ever been dismissed from employment or resigned in lieu of being dismissed for inefficiency, delinquency, or misconduct? Yes No

If "yes" explain below. (A yes answer will not automatically preclude you from employment consideration.) **Failure to respond to this question will result in an incomplete application.**

Name: _____ Signature: _____ Date: _____

FORMAL EDUCATION AND TRAINING: (List in chronological order starting with most recent education.)

Do you have a high school diploma or equivalent? Yes No

Name of Institution	Location City and State	From MM/YY	To MM/YY	List Diploma Or Degree Earned	Major and Minor Areas of Study

APPLICABLE COUNSELING & NON COUNSELING EDUCATIONAL EXPERIENCE IN AN EDUCATIONAL INSTITUTION:

Years/ Months in Position	From/To MM/YY	% of Full- Time	Status Reg., Hrly., or Sub	University, College or High School	Grade Level	Name of Institution	City and State	May We Contact

Describe duties _____
Reason for leaving _____

Years/ Months in Position	From/To MM/YY	% of Full- Time	Status Reg., Hrly., or Sub	University, College or High School	Grade Level	Name of Institution	City and State	May We Contact

Describe duties _____
Reason for leaving _____

OCCUPATIONAL EXPERIENCE NOT IN AN EDUCATIONAL INSTITUTION: List in chronological order Including armed services.

Years/ Months in Position	From/To MM/YY	% of Full- Time	Status Reg., Hrly., or Sub	University, College or High School	Grade Level	Name of Institution	City and State	May We Contact

Describe duties _____
Reason for leaving _____

Years/ Months in Position	From/To MM/YY	% of Full- Time	Status Reg., Hrly., or Sub	University, College or High School	Grade Level	Name of Institution	City and State	May We Contact

Describe duties _____
Reason for leaving _____

Are you now or have you ever been employed by the State Center Community College District?

Yes No

If yes, give position _____

Are you related by blood or marriage to any person(s) presently employed by the District?

Yes No

If yes, give name(s) or relative(s) _____

Are you able to perform the job functions listed on the job description with or without accommodation?

With accommodation
 Without accommodation

If "*with accommodation*", how would you perform the function, and what kind of accommodation do you need:

REFERENCES: COMPLETE ALL BOXES DO NOT WRITE "SEE RESUME". (not a substitute for required letters of reference)

NAME	ORGANIZATION	POSITION	TELEPHONE NUMBER	ADDRESS

CERTIFICATION AND AGREEMENT OF APPLICANT

I _____ hereby certify that all statements made on this application and attachments are true and complete to the best of my knowledge. I understand that any false, incomplete or incorrect statement may result in my dismissal from employment with the State Center Community College District.

I authorize the District to investigate my references, work record, education, performance evaluations or any other matters relating to my suitability for employment. I authorize and direct my former or current employer and educational institutions to release to the District any information they may have concerning my employment or education (if I agreed to have them contacted on the previous application page). I also authorize the District to obtain and review any documents or records, including driving records, which are applicable to my employment. I release the parties listed above from any and all liability related to this process of supplying or gathering any information about my suitability for employment.

I also understand that an incomplete application may delay or prevent employment opportunities with the College(s). I hereby release the College(s), as well as those contacted by the College(s) from any liability or damage which may result from providing or using the information requested.

Signature _____

Date _____