



## Summer Internship Application

The JFS Summer Internship Program is made possible by the Morris and Ruth Malett Summer Internship Fund. This part-time internship is available annually to a **college or graduate student** whose area of academic interest is in Judaic studies, human services, or a field relevant to the work of Jewish Family Services.

### Personal Information:

Name: \_\_\_\_\_  
Last First MI

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

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

### Internship Preferences:

Is there an area or group you are particularly interested in working? Please check all that apply.

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> No preference | <input type="checkbox"/> Counseling                  | <input type="checkbox"/> Research/Evaluation    |
| <input type="checkbox"/> Adults        | <input type="checkbox"/> Case Management             | <input type="checkbox"/> Workshop Development   |
| <input type="checkbox"/> Children      | <input type="checkbox"/> Emergency Family Assistance | <input type="checkbox"/> Marketing/social media |
| <input type="checkbox"/> Seniors       | <input type="checkbox"/> Client Satisfaction         | <input type="checkbox"/> Program Development    |
- Other: \_\_\_\_\_

Are there groups with which you would not feel comfortable working?

No  Yes (please explain) \_\_\_\_\_

### Availability:

Available beginning & end dates start date \_\_\_\_\_ end date \_\_\_\_\_

At what times are you interested in interning?  Mornings  Afternoon  Flexible Schedule

Do you have access to an automobile you can use?  Yes  No

Have you ever worked or volunteered for JFS?  Yes  No

If yes, when and in what position?

\_\_\_\_\_

What is your anticipated career path?

\_\_\_\_\_

How did you hear about the JFS summer internship opportunity?

\_\_\_\_\_



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Are there any workplace accommodations that would assure better job placement and/or enable you to perform your job to your maximum capability?

Yes

No

If yes, please explain:

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Have you ever been charged or convicted of a crime?

Yes

No

If yes, please note a charge/conviction does not automatically mean you cannot be employed. Indicate what you were charged/convicted of, and how long ago.

Do you have any pending criminal charges against you?

Yes

No

If yes, please explain:

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### **Current Educational Background**

Type of School	Name of School	Degree	Area of Study
College/University			
Graduate School			

Community/ professional organizations, honors, and awards:	
Publications and Articles:	
Activities relevant to the internship for which you are applying:	



**Employment History – Please list employment history beginning with most recent employer.**

**Company Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Position:** \_\_\_\_\_

**Job Duties** \_\_\_\_\_

**Company Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Position:** \_\_\_\_\_

**Job Duties** \_\_\_\_\_

**References**

**Personal Reference #1**

**Name:** \_\_\_\_\_ **Relationship** \_\_\_\_\_  
Last First MI

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

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **How many years have you known:** \_\_\_\_\_

**Personal Reference #2**

**Name:** \_\_\_\_\_ **Relationship** \_\_\_\_\_  
Last First MI

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

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **How many years have you known:** \_\_\_\_\_

**Personal Reference #3**

**Name:** \_\_\_\_\_ **Relationship** \_\_\_\_\_  
Last First MI

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

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **How many years have you known:** \_\_\_\_\_

I certify that all of the statements in this application are true and complete to the best of my knowledge. I understand that false or incomplete answer may be grounds for not considering me or for my dismissal.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_



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Please explain why you are applying for this internship, how you anticipate this internship may further your career path and any facts that you believe are relevant to your consideration for this internship. (500 words or less)



## Summer Internship Application

### Jewish Family Services of Rochester, Inc. Summer Internship Program

Jewish Family Service offers a summer internship program made possible by the Morris and Ruth Malett Summer Internship Fund. This part-time internship is available annually to a **college or graduate student**. The internship program is designed to provide a student with an opportunity to learn about Jewish Family Service and the programs it provides.

**Eligibility:** A candidate must be either an undergraduate or graduate student whose area of academic interest is Judaic studies, human services, or a field relevant to the work of Jewish Family Services.

**General Information:** Interns are expected to work between 12-18 hours a week during the 8 week internship period. The Morris and Ruth Malett Summer Internship is only offered during the summer. All interns are subject to the applicable JFS employee rules.

**Application Procedures:** Candidates must complete an application form and submit it with their cover letter and essay. All application items must be submitted as a complete package. Incomplete applications will not be reviewed.

**Application Deadlines:** Applications are due by May 1.

**Email completed application to Barbara Connor, Chief Administrative Officer at [bconnor@jfsrochester.org](mailto:bconnor@jfsrochester.org) or mail to:**

Jewish Family Services  
Summer Internship Program  
255 East Ave – Suite 201  
Rochester, NY 14604



**Jewish Family Services**

**Confidentiality Policy**

All staff members are obliged to diligently protect the privacy of the Agency's clients. All clients are insured of the confidentiality of this service, and it is expected that they will be treated with sensitivity and professionalism. Because of the nature of the services which JFS offers, all records, even the fact that a person is a client, must be considered confidential information. Under no circumstances may such information be revealed to persons other than JFS authorized personnel and/or appropriate and specific state and/or regulatory agencies without the express permission of the client. Agency personnel records are also confidential. Violation of this policy will be grounds for immediate dismissal. The Agency abides by all HIPAA regulations.

Interns shall respect the rights of all clients, staff, and community providers by maintaining a level of professional confidentiality. Interns are required to keep program issues, concerns, and observations in the program. This expectation is extended to casual contacts, interviews, and written papers.

Violating this policy and releasing confidential information could result in the immediate dismissal of a person from a Jewish Family Service internship position.

By signing this form, I acknowledge its message and agree to the terms of this policy.

\_\_\_\_\_  
Signature of Intern

\_\_\_\_\_  
Date



**Jewish Family Services Internship Agreement**

By signing this agreement, you agree to:

- Maintain high ethical standards and appropriate behavior.
- Be a team player and communicate regularly with your supervisor and program staff.
- Report suspected abuse or neglect to your supervisor.
- Respect client, volunteer, staff, program, and agency confidentiality
- Give permission to check your references.
- Complete orientation and training as required for your internship service.
- Keep required records of your internship time.
- Complete and “Exit Interview” upon completion of your internship time with the program.

By signing this agreement, you do not agree to assume any financial or legal responsibilities. You do not agree to be unconditionally available or to be the solver of all problems.

I, \_\_\_\_\_, understand that by signing below, I agree to meet the expectations outlined above and to abide by the policies of Jewish Family Services.

\_\_\_\_\_  
Intern

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor

\_\_\_\_\_  
Date