



Hub City Outreach Center
4 Briercroft Office Park
Lubbock, TX 79412
P: 806-701-1687
F: 806-368-6003
Team@HubCityOutreachCenter.org

Internship Application

Application Date _____ Desired Position (check box) ☐ Volunteer ☐ Internship

Desired Program(s)/Area(s) for Volunteer/Internship _____

Full Name _____ Preferred Name _____

Birth Date ____ / ____ / ____ Valid Driver's License # _____ Social Security # ____ - ____ - ____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Cell _____ Email _____

Emergency Contact Name _____ Relationship _____ Phone Number _____

Employment History:

Current Employment:

Are you currently employed ☐ Yes ☐ No If so, where? _____

Address of Employer _____ City _____ State _____ Zip _____

What is your position? _____ How long have you worked at this place? _____

May we contact your employer? ☐ Yes ☐ No; Supervisor Name & Number _____

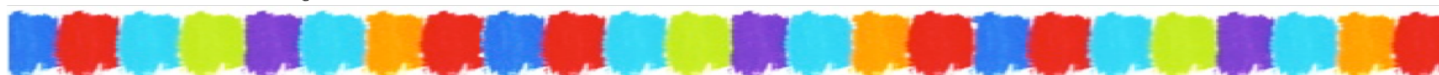
Do you have any family members that work at Hub City Outreach Center or have they ever? ☐ Yes ☐ No _____

If yes please explain _____

Highest Education & Skill Background

School _____ Dates Attended _____

School _____ Dates Attended _____





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Do you belong to any special groups, clubs, or organizations? _____ If so, please describe them _____

Have you ever been convicted of a crime? _____ If so, please explain _____

Please tell us about your hobbies:

Reason for wanting to be part of the Hub City Outreach Center team as a volunteer or intern?

Please check the boxes of the skills/trainings you possess:

- | | | |
|---------------------------------------------------------------------|---------------------------------------------------|-----------------------------------------------------------|
| <input type="checkbox"/> Computer Skills (Adobe, Microsoft) | <input type="checkbox"/> De-escalation Training | <input type="checkbox"/> Anger Management Training |
| <input type="checkbox"/> Administrative Skills (Organizing, filing) | <input type="checkbox"/> Safe-Talk Training | <input type="checkbox"/> Work with at-risk youth/families |
| <input type="checkbox"/> Teaching/Presenting Experience | <input type="checkbox"/> First Aid & CPR Training | <input type="checkbox"/> Word-Press Applications |
| <input type="checkbox"/> Tutoring, please list subjects _____ | <input type="checkbox"/> Facebook / Ad-Words | |
| <input type="checkbox"/> Other Languages Spoken, please list _____ | | |

References, please provide: (1) academic, (1) professional capacity, (1) personal/character

Name _____ Company _____ Phone _____ Relationship _____

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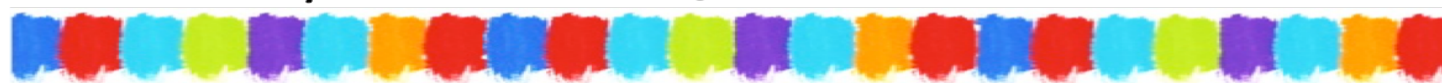
Name _____ Company _____ Phone _____ Relationship _____

Are you willing to take a drug test? ☐ Yes ☐ No

Are you willing to submit for a criminal background check? ☐ Yes ☐ No

* federal background checks are required for all Youth Prevention and Mentoring volunteer and intern positions

How did you hear about us? _____





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Please explain your availability. Please note that our available work hours vary, as our latest hour goes to 8pm on some days to serve the community. Please provide your availability on an 8am – 8pm frame.

Day: M Tu W Th F Sa Su

Hours:

Please provide any additional information you would like us to know about you: _____

I certify the above following is true to the best of my knowledge. I understand that this is not a guarantee the above position, and if I am considered for a volunteer or internship position, do agree to follow all policies and procedures as any other Hub City Outreach Center employee. I do give Hub City Outreach Center my permission to check my current, previous employers, references, and do background checks.

Print Name _____ Date _____

Signature _____ Date _____





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FOR ADMIN USE ONLY:

Projected Interview Date: _____

Supervisors Name _____ Date _____

HR Rep Name _____ Date _____

Additional Panel Interview Staff Name _____ Position _____

Additional Panel Interview Staff Name _____ Position _____

Additional Panel Interview Staff Name _____ Position _____

Additional Comments:

