



Cobb County...Expect the Best!

**Cobb County Water System
Water Quality Laboratory**
662 South Cobb Drive, Marietta, Georgia 30060
770-528-1482
www.cobbstreams.org

Intern Application

Personal Information:

Date:

Name:

Address:

City:

State:

Zip

Telephone (home):

Cell Phone:

Email Address:

Check if 16 years of age or older:

Employment Information:

Current Employer:

Position/Title:

Responsibilities include:

Other work experience (briefly describe):

Education Information:

Highest level of education completed:

___ High School/GED ___ Associate Degree ___ Undergraduate Degree

___ Graduate Degree ___ Other

Volunteer Information:

Have you volunteered before? Yes No If so, where?

Briefly describe your duties:

How did you hear about our Internship Program?

Please check all skills, abilities, or interests below that are applicable to you:

- | | |
|--|--|
| <input type="checkbox"/> Field work (collecting water samples) | <input type="checkbox"/> Knowledge of a foreign language |
| <input type="checkbox"/> Office work (data entry, clerical) | <input type="checkbox"/> Knowledge of nature and science |
| <input type="checkbox"/> Graphic design | <input type="checkbox"/> Knowledge of wildlife |
| <input type="checkbox"/> Arts and crafts | <input type="checkbox"/> Working with youth |
| <input type="checkbox"/> Storytelling | <input type="checkbox"/> Working with adults |
| <input type="checkbox"/> Gardening | <input type="checkbox"/> Animal Husbandry |

Please list any experience you have using computer software and/or social media:

Other special interests, skills, abilities, or hobbies:

Other organizations for which you currently volunteer:

Which language(s) do you speak, read and/or write:

What are you hoping to gain from interning with the Watershed Stewardship Program?

What are your goals?

Schedule Information:

Please list preferred intern assignments:

Please check all available times you are available to volunteer:

	Monday	Tuesday	Wednesday	Thursday	Friday
Morning 9am-1pm					
Afternoon 1pm-5pm					

Photo Release

By signing here _____, I give permission for any photograph of myself, obtained during intern activities, to be used in informational material for Cobb County Water System.

I certify that the information given in this application is true and complete to the best of my knowledge. I agree and understand that if I am accepted into the Cobb County Water System intern program any false statements may result in my dismissal from the program. I understand that submission of this application in no way assures me a intern position.

I acknowledge that there is no salary or other compensation for my service as an intern.

I understand that Cobb County shall not be responsible for the loss or damage of personal property and possessions of the volunteer.

I understand that Cobb County is not responsible for injuries incurred by volunteers.

I understand that volunteers must honor the confidentiality of Cobb County customers, employees, volunteers and other interns.

Signature of Intern: _____ Date _____

Cobb County Government does not discriminate on the basis of race, color, national origin, sex, religion, age or disability in employment or the provision of services.

Office Use Only:

Date: Intern Supervisor:

- Requisition for Intern
- Internship Application
- Acknowledgment and Waiver of Compensation
- Contact Info for Interns
- Criminal Background Authorization
- Sedition and Subservice Activities Questionnaire
- Badge
- Volunteer Timesheets
- Supervisor Contact Information
- Orientation Checklist
- Intern Policies and Guidelines

Interview Date:

Start Date:

Training Date:

Resignation Date:

Reason for Resignation:

Release Date:

Reason for Release:

Comments: