



FwdBound Program Paid Internship Application

Name: _____

Phone: _____ Email: _____

Mailing Address: _____

Home School District: _____ Grade: _____

Why are you interested in a paid internship with The Arc of Delaware County? (use back if needed)

Do you have a specific area of interest? (We currently have paid internship opportunities in our Residential, Day, Community Services, and Pre-School programs, with potential opportunities in Maintenance, Transportation, and Business Office.)

Availability:

Mondays From _____ To _____

Tuesdays From _____ To _____

Wednesdays From _____ To _____

Thursdays From _____ To _____

Fridays From _____ To _____

Saturdays From _____ To _____

Sundays From _____ To _____

Signature: _____

Date: _____

Parent's Signature: _____
(if under 18 yrs of age)

Date: _____

Please return completed application along with copy of working papers and two Letters of Recommendation (form attached) to:

The Arc of Delaware County, Attn: FwdBound Paid Internship Program,
34570 State Hwy 10, Walton, NY 13856 or email to delarc@delarc.org