

Application to Participate in the 2019-2020 EECU Business Financial Services Pathway



Turn in the completed application to the EECU Clovis West Branch.

PLEASE PRINT **ALL** INFORMATION REQUESTED
IN BLACK OR BLUE INK

**DEADLINE TO APPLY:
March 8, 2019**

Applicant Information

First Name		Last Name		Middle Initial	
Street Address				Apartment/Unit #	
City		State		ZIP	
Phone Number		E-mail Address			
Student ID No.					

Referral Source: How did you hear about us?

Walk In
 School Counselor
 EECU/CWHS Website
 Morning Announcements
 CTE Assembly

Student currently in the program. I was referred by: _____
 Other _____

Do you have any friends or relatives working for EECU? Yes No If yes, please list names and relationship:

Name _____ Relationship _____

Name _____ Relationship _____

Have you applied for the EECU Internship before? Yes No

Education

High School	
In the fall semester, will you be a junior or senior?	

Availability

Do you have any extra-curricular activities/sports/clubs that you may be involved with during the yearlong internship? If so, please list the activities here. We strive to accommodate your availability.

Job Skills

Indicate any foreign languages you can speak, read, and/or write along with your level of ability:

		Fluent	Good	Fair	None
Language _____	Speak:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Read:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Write:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

List any special skills, training, awards, or personal strengths:

-
-
-
-
-
-

Work Experience (Employment, babysitting, paper route, yard work, volunteer, etc.)

Employer		Phone	
Job title		Supervisor	
Job description/ responsibilities			
Date employed	_____ to _____	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>

Employer		Phone	
Job Title		Supervisor	
Job description/ Responsibilities			
Date employed	_____ to _____	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>

Employer		Phone	
Job Title		Supervisor	
Job description/ Responsibilities			
Date employed	_____ to _____	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>

In a few brief sentences, describe why you would like to join EECU's internship:

Teacher/Administrator Reference

Please list one teacher or administrator who has knowledge of your work performance. This person cannot be a relative.

Name of Teacher or Administrator		Phone Number	
School Affiliation			

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge. If this application leads to acceptance into the program, I understand that false or misleading information in my application or interview may result in my release. Completing the Application to Participate does not guarantee acceptance.

Signature of Applicant _____

Date _____

If you have any questions please contact Christy Machado, EECU Clovis West Branch Manager at (559) 436-6090.