

# **ArtWorks Internship Application**

Hired to Create. Inspired to Succeed.

Paid Summer Internship Position (\*For current 9<sup>th</sup> - 12<sup>th</sup> graders only)

Select One:

Visual Arts 🗆

Performing Arts

Creative Writing/Poetry (WordSpeak)

# The following materials MUST be submitted by Friday, April 20<sup>th</sup>, 2018 at 4:00 PM

- Completed application form
- Typed and completed responses to the short answer section of this application
- 1 completed recommendation form (attached)

# ABOUT THE PROGRAM (Please read carefully.)

Arts for Learning's ArtWorks Summer program is a 6-week, partially paid internship in the arts. Interns will work alongside a Project Facilitator in an artistic co-op of their choice to create works of art, while learning key workforce development skills. Additionally, all interns are required to attend a 2-hour writing lab each week. Interns will also produce public performances and exhibitions of their work. <u>No prior arts experience is necessary</u>, but applicants should have a strong interest in the arts and a willingness to learn in a diverse setting.

Interns will receive payment for (120) hours of work. Additionally, interns participate in (30) hours of unpaid community service, and (30) hours of unpaid art and workforce skill development.

#### **SCHEDULE & PAY RATE**

- Program Dates/ Days: June 18 July 28, 2018, Monday Friday
- Program Hours\*: 9:00 am 3:30 pm (\*Hours subject to change)
- Interns will be paid \$8.25/hour

#### **LOCATION**

• The Light Box at Goldman Warehouse: 404 NW 26th Street, Miami, FL 33127

# PERSONAL INFORMATION (Please print or type clearly.)

Name:				
F	First	Middle	Last	
Address:			Apt. Number:	
City:	St	ate: Zip Code:	Preferred Phone: _	
Student Email (required): _				Cell 🛛 Home 🗆 Work
Parent(s) or Guardian(s):			Daytime Phone(s):	
Current School:			Current Grade Level:	
Type of School:  Public	🗌 Private 🔲 Home Sch	ool Will you be at lea	st <u>14 γears old</u> as of June 18,	2018?: 🗆 Yes 🗆 No
Gender: 🗆 Male 🛛 F	Female 🛛 Prefer not	to answer		

# Your answers to these questions are confidential and do NOT affect your acceptance into the program. Applicants of all income levels may apply.

Have you or anyone in your household ever received cash payments under a federal, state, or local income-based public assistance program (for example, welfare, free school lunches or unemployment benefits)? 
Ves 
No

Have you or anyone in your household received or been determined to be eligible to receive Food Stamps within the past year?

Do you live: 🛛 With your parents 🗆 On your own	With relatives	With non-relat	tives
Are you in the dependency system? $\Box$ Yes $\Box$ No	How many people (including y	vourself) live in your	household?
Ethnicity (optional):         Black Non-Hispanic         Vhite Non-Hispanic         Other	Hispanic 🗌 Asian/Pacific	: Islander	Native American Indian
Do you have a documented disability?   Yes  No	0		

#### **SHORT ANSWER**

# Please answer ALL of the following questions on a separate page. <u>Typed responses are required.</u> You must answer each question in this section.

- Will you be able to attend all scheduled dates and times as listed above? If not, please explain.
- Why do you want to participate in ArtWorks? How will participating help you reach your future goals?
- Which workforce skill(s) do you need to better develop?
- Describe an experience where you were a part of a team or group project. What did you learn from that experience? Were there any disappointments? If so, how did you handle it?
- Why is it important for young artists to have job opportunities in the arts?
- Arts for Learning is an equal-opportunity employer. Do you have any special needs or physical limitations that require accommodations? Please explain.

By signing below, I declare that all information provided on this application is true, accurate and complete to the best of my knowledge and that I have withheld nothing that, if disclosed, would alter the integrity of this application. I authorize investigations of all statements contained in this application as may be necessary to make an employment decision. I agree that Arts for Learning will not be held liable in any respect if a job offer is not extended, or is withdrawn, or employment is terminated because of false statements, omissions or responses made on this application. I understand that employment for ArtWorks is "at will," which means that either I or Arts for Learning can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by law. I hereby acknowledge that I have read and understand this entire application.

Date

#### BOTH SIGNATURES BELOW ARE REQUIRED:

Signature	of Applican	t

Signature of Parent/Guardian \_\_\_\_\_\_ Date \_\_\_\_\_ Date \_\_\_\_\_

All required documents must be submitted to Ivy Bennett at Arts for Learning

### by 4:00 PM on Friday, April 20, 2018

### Applications may be mailed or emailed.

### PLEASE SELECT ONLY ONE DELIVERY OPTION.

- 1. Mail: Ivy Bennett, Arts for Learning, 404 NW 26th Street, Miami, FL 33127 / Phone 305-576-1212 ext. 36
- 2. Email : ivy@A4Lmiami.org

You will be notified of your interview appointment via email.

#### **ARTWORKS RECOMMENDATION FORM**

**APPLICANT:** You may submit one (1) letter of recommendation or this form, completed by an adult older than 21 years of age who is not a relative or friend. Please select someone who knows your work performance well, such as a teacher, past employer, mentor, or community or clergy leader. This form <u>MUST</u> accompany your application. We may contact your reference to verify their recommendation of your work.

**REFERENCE:** You may write a letter of recommendation for the Applicant, or complete this form. This recommendation is an important component of the ArtWorks hiring process. Applicants must submit this recommendation with their application. If you write a letter of recommendation, please be sure to reflect on questions below and to include your contact information. Thank you.

Name if Applicant:	
Name of Reference:	
Reference Contact Phone:	
Reference Email Address:	
What is your relationship to the Applicant?	

How long have you known him/her? \_\_\_\_\_

Circle the rating that best describes the applicant:

DEPENDABILITY	Excellent	Good	Fair	Poor
PUNCTUALITY	Excellent	Good	Fair	Poor
ACCURACY OF WORK	Excellent	Good	Fair	Poor
WILLINGNESS TO LEARN	Excellent	Good	Fair	Poor
JUDGEMENT	Excellent	Good	Fair	Poor
COMMUNICATION SKILLS				
VERBAL	Excellent	Good	Fair	Poor
WRITTEN	Excellent	Good	Fair	Poor
PROFESSIONALISM	Excellent	Good	Fair	Poor
RESPECT FOR OTHERS	Excellent	Good	Fair	Poor
OVERALL IMPRESSION	Excellent	Good	Fair	Poor

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# **ARTWORKS RECOMMENDATION FORM (cont.)**

Please answer the following questions.

Have you observed the Applicant working on a team? If so, what was his/her role? How did he/she interact with the team? Would you recommend the Applicant for a job in a collaborative, team environment?

Is the Applicant self-motivated? Does he/she take direction well or require extra direction and/or supervision when assigned a task?

How does the Applicant respond to constructive criticism?

Would you recommend the	e Applicant for the ArtWorks	Internship program?	(Please circle one):	Yes	No
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We encourage you to provide any additional comments.

REFERENCE SIGNATURE\_\_\_\_\_ Date\_\_\_\_\_