

# Alachua County Library District

## Library Intern Program Application Checklist

Dear Applicant,

Thank you for your interest in Alachua County Library District's High School Internship Program. Applications are not considered complete unless all of the following items are included. Letters of recommendation should be treated as confidential and can be included in sealed envelopes.

Please use this checklist to make sure your application is complete.

1. \_\_\_\_ Complete application form (A-H) including branches for which you are applying
2. \_\_\_\_ Essay typed on separate sheet of paper
3. \_\_\_\_ Signed letter of recommendation from a teacher of your choice; it should address your ability to succeed in a hands-on internship program, career goals, and dedication; this teacher can be from the present or previous school year(s); if you are home-schooled, please get a letter of recommendation from another adult (other than your parents) who knows you in a leadership or academic situation.
4. \_\_\_\_ High school transcript including grades from most recent semester completed

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### Mail or drop-off the completed application to:

Alachua County Library District  
Attn: Administration  
High School Intern Program Application  
Headquarters – 401 East University Avenue  
Gainesville, FL 32601-5453

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Applications will be accepted by mail or drop-off only (no faxes) and must be received or postmarked by midnight on the due date. Late or incomplete applications will not be considered. Please call (352) 334-3910 with any questions.

We encourage you to submit your applications before the due date.

**One position per application form** – You may apply for only one internship semester on each application form. If you are not hired for a particular semester and wish to apply for a future semester, you must submit a new application.

The **Alachua County Library District Internship Program** is designed to provide academic enrichment and career awareness for juniors and seniors in high school who plan to attend college and are curious about exploring careers at the library.

Candidates must be eligible to work in the United States and meet the following criteria:

- Current high school junior or senior, age 16 or older
- GPA 2.5/4.0 or higher

**Drug testing is required for all final applicants. All offers of employment are contingent upon the successful completion of a pre-employment drug test.**

# Alachua County Library District Library Intern Program Application

(please type or neatly print with a black or blue ballpoint pen)

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This application is for the **Summer 2019 semester, June 24 – August 23, 2019 (application deadline is: May 24, 2019)**. Students will be placed in one of our 12 library branch locations. Please indicate your top three choices (the locations to which you can provide your own transportation): 1 = 1<sup>st</sup> choice, 2 = 2<sup>nd</sup> choice, 3 = 3<sup>rd</sup> choice.

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> City of Alachua | <input type="checkbox"/> Headquarters<br>(downtown Gainesville) | <input type="checkbox"/> Newberry            |
| <input type="checkbox"/> Archer          | <input type="checkbox"/> High Springs                           | <input type="checkbox"/> Library Partnership |
| <input type="checkbox"/> Cone Park       | <input type="checkbox"/> Micanopy                               | <input type="checkbox"/> Tower Road          |
| <input type="checkbox"/> Hawthorne       | <input type="checkbox"/> Millhopper                             | <input type="checkbox"/> Waldo               |
- .....

## A. Personal Information

- Name: \_\_\_\_\_  
Last First Middle Initial
- Address: \_\_\_\_\_  
Street  
\_\_\_\_\_  
City State Zip code
- Father/Guardian Name: \_\_\_\_\_ phone number \_\_\_\_\_  
Mother/Guardian Name: \_\_\_\_\_ phone number \_\_\_\_\_
- Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
month day year
- Current Phone Number: (\_\_\_\_) \_\_\_\_\_
- Email address: \_\_\_\_\_  
If you do not have access to email, please check here: \_\_\_\_\_
- Is the email address given:  
\_\_\_\_ your email \_\_\_\_ your parents' email \_\_\_\_ a friend's email \_\_\_\_ other
- Are you eligible to work in the United States? Yes No
- Who to contact in case of an emergency:  
Name \_\_\_\_\_  
Last First  
Relationship to Applicant \_\_\_\_\_  
Phone number where they can be reached (\_\_\_\_) \_\_\_\_\_

10. Have you ever been employed by the Alachua County Library District? Yes No

If yes, please list department and dates:

\_\_\_\_\_

**B. Educational Background**

11. What is the name and address of your high school?

\_\_\_\_\_  
Name of current high school City State

12. What are the names and address of other high schools, if any, that you attended?

\_\_\_\_\_  
Name of other high school City State

\_\_\_\_\_  
Name of other high school City State

13. What grade are you in now? \_\_\_11<sup>th</sup> \_\_\_12<sup>th</sup>

14. When do you expect to graduate? \_\_\_\_/\_\_\_\_  
month year

15. How did you learn of this program?

\_\_\_ teacher \_\_\_ internet \_\_\_ friend \_\_\_ other \_\_\_\_\_

16. What is your high school GPA? \_\_\_\_\_ (i.e. 3.0 on a 4.0 scale, 75% on a 100% scale)

**C. Extracurricular/Leadership Activities**

17. Please list extracurricular, leadership, and/or volunteer activities in which you have participated, and the approximate dates:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**D. Recommendation**

18. Please give the name, position, and contact information of the person from whom you will be receiving a letter of recommendation:

Name \_\_\_\_\_ Position/Title \_\_\_\_\_  
Last First MI

Phone (\_\_\_\_) \_\_\_\_\_ Email address \_\_\_\_\_

**E. Personal Statement**

20. Write a statement describing why you should be selected for an internship at the ACLD. This statement should be no more than one paragraph in length.

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**F. Essay**

**Essay should be typed on a separate piece of paper and no more than 1 page in length.**

What do you hope to gain from your experience in the ACLD High School Internship Program?

**(Application continued on page 5)**

Your application is not complete until you have obtained the required signatures in sections G and H on page 5.

**G. Pre-Employment Statement**

I hereby certify that all statements on this application are true. I agree and understand that any misstatements, misrepresentations, or omissions may result in any offer of internship made by the Alachua County Library District to be withdrawn or my internship with the Alachua County Library District to be terminated. The Alachua County Library District is authorized to verify information contained in this application and any attachments. I authorize anyone having such information to release it to the Alachua County Library District.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

**H. Parental/Guardian Consent and Release From Liability**

I, \_\_\_\_\_, am the parent or guardian of  
\_\_\_\_\_, a minor whose date of birth is \_\_\_\_\_.

I give consent for my child to serve as a paid intern for the Alachua County Library District and to take a drug test if s/he is a final candidate for the internship.

I further give consent to the use of my child’s name and photographic likeness, in original or altered form or medium, for promotional materials in any medium. I release any claim associated with proper use of my child’s name or photographic likeness, and waive any right I may have to inspect or approve the photographic likeness or promotional materials.

I understand this internship may involve my child riding in a Library District vehicle with library staff, which is considered part of the worksite. I further understand that the Library District and its employees are not responsible for my child while my child is away from the worksite. In exchange for my child’s employment and other good and valuable consideration, I release the Library District and its employees and agents from any duty: (1) to supervise my child while my child is off the worksite and (2) to notify me if my child leaves the worksite.

I release the Library District and its employees and agents from liability for any claim or action that may arise out of the acts or omissions of its employees or agents or those of a third party, whether negligent or otherwise, causing any injury to my child and relating to the supervision of my child.

In signing this, I represent that I am 18 years of age or older. I have read and fully understand this release, and I have signed this release willingly and voluntarily.

The Alachua County Board of County Commissioners and the Alachua County Library District Governing Board support the Drug Free Workplace and Drug Testing Policy. DRUG TESTING IS REQUIRED FOR ALL FINAL CANDIDATES. All offers of employment are contingent upon the successful completion of a pre-employment drug test. Copies of the *Drug Free Workplace and Drug Testing Policy* are available at the Receptionist’s desk, Human Resources Office, First Floor, County Administration Building.

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date

# Alachua County Equal Employment Opportunity

The following information is requested to satisfy Federal Equal Employment Opportunity reporting requirements and for our Affirmative Action purposes. It will not be kept with your application.

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Male \_\_\_\_\_ Female \_\_\_\_\_

Position Applied For \_\_\_\_\_

Department \_\_\_\_\_

Check the race/ethnic group with which you identify:

|   |  |
|---|--|
| White (not Hispanic) _____                  | Black / African American (not Hispanic) _____  |
| Hispanic / Latino (any racial origin) _____ | American Indian / Alaskan Native _____         |
| Asian (not Hispanic) _____                  | Native Hawaiian / Other Pacific Islander _____ |
| Two or more racial groups _____             |  |

Will you require any special accommodation during the interview process with Alachua County? If so, please specify.

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