



Thank you for applying to the **STEM Instructor Internship** with Walking Mountains Science Center. The Eagle Valley Outdoor Movement Partners are equal opportunity employers. Eagle Valley Outdoor Movement Partners do not discriminate on the basis of race, gender, creed, or sexual orientation in any of its policies or programs. **Applications due by December 18th, 2018.** Completed applications will be kept on file for one year. **Please print legible**

Student Information:

Application Date: _____

Name _____

Date of Birth _____

Home Phone _____

Day/Cell Phone _____

Mailing Address _____

City/State/Zip _____ E-mail _____

Age _____ Year in school? _____ Do you hold a valid driver's license? _____ State _____

Which internship and days are you interested in? (Check all that apply)

STEM (3:40-5:40pm):

- Tuesdays at Homestake Peak School
- Wednesdays at Eagle Valley Middle School
- Thursdays at Berry Creek Middle School

Girls in Science (2:45-4:45pm):

- Mondays at Eagle Valley Elementary
- Tuesdays at Brush Creek Elementary
- Tuesdays at Gypsum Elementary
- Wednesdays at Red Hill Elementary
- Thursdays at June Creek Elementary
- Thursdays at Homestake Peak (3:10-5:15pm)

Parental Information:

Name _____

Relationship _____

Home Phone _____

Day/Cell Phone _____

Mailing Address _____

City/State/Zip _____ E-mail _____

Reference Information:

Please Provide information on two references not related to you- i.e. teacher, employer

Name	E-mail	phone	Relationship	Years Known

In the space provided below, please write why the STEM or Girls in Science instructor internship interests you, how you will benefit from the program and please share a future goal.

Please read each statement carefully before signing.

I certify that all information given in this application is true and complete. I understand that any false information or omission may disqualify me from further consideration and may justify my dismissal if discovered at a later date.

I authorize investigation of all statements and matters contained in this application. I authorize all previous employers or persons having information concerning me or my record to report such information to Walking Mountains Science Center. I release Walking Mountains Science Center from all claims or liabilities whatsoever on account of making such inquiry or making such disclosures whether favorable or unfavorable. I agree, if accepted to the internship program, to devote my best efforts to the performance of my assignments, duties; to comply with all rules and regulations, and to obey all lawful directives of supervisors designated by the program.

I have read and understand all portions of this application and have answered all questions completely and truthfully.

Signature _____ Date _____

If you have any questions do not hesitate to contact:

Megan Carter
Girls in Science Coordinator
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970-827-9725

Paul Leininger
Lead STEM Instructor
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Incomplete applications WILL NOT be considered.

