

The Mount Sinai Kravis Children's Hospital

Student Internship Application

KidZoneTV Internship Fall 2017 (September-December)

Date: _____

Name: _____ Day Phone #: _____

_____ Address (school): _____ Eve Phone
#: _____

Home address: _____

Home phone #: _____

In case of emergency contact: _____

Graduate School: _____

Expected date of graduation: _____

In order to be considered for an internship position, the following information must be submitted with this application:

- 2 letters of recommendation (i.e. - professor, former supervisor, etc...)
- A resume or CV highlighting notable/relevant experience
- A personal statement

Please answer the following questions:

1. Have you worked with children before in any capacity?
2. Are you familiar with a hospital environment?
3. Describe past experiences of working with a team.

Personal Statement

Please discuss briefly your background and tentative career plans. Include your reasons for desiring a placement with the KidZoneTV program at Mount Sinai and how these reasons relate to a potential career. You may also include special skills and talents that enhance your ability to work with children or adult palliative care patients in this setting. Please type this information and attach to your application.

Please submit materials by August 18th 2017

If you have any questions, please email: Mathea Jacobs Mathea.jacobs@mountsinai.org

For Office Use Only

Date Received: _____

Interview Date: _____

Volunteer Office Notification: _____