

Los Angeles Catholic Worker

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2019 Summer Internship Application

Name: _____ Phone: _____

Address: _____ Date of Birth: _____

City/State/Zip: _____ E-mail: _____

Please state your faith preference _____

Emergency contact: _____

Personal Reference: Name: _____ Phone Number _____

Do you have any special dietary needs (Diabetic, Vegan, etc): _____

Education: High School __ College: _____ Major/Minor: _____

Degree or Current Level: _____ Foreign Language: _____

Special skills: _____

Occupational background (most recent first) Type of work/Dates/Agency or Employer:

Volunteer experiences: _____

Qualifications and experiences for this type of service: _____

We work hard. Are there any reasons why you could not perform a rigorous day's work? _____

How did you hear about us? _____

Any reasons why you might not be here the entire length of the program? _____

We have a preference for individuals who are interested in long-term commitment, is this possible for you? _____

What are your plans for the Fall? _____

Any extra comments: _____

Long-term community members commit to not having a personal car under most circumstances. Is this a possibility for you? _____

Please include a personal one-page account of your faith-journey, including any understanding you have gained concerning the Catholic Worker movement, to acquaint us with your hopes and aspirations.

Thank you. Please call us if you have any questions - (323) 267-8789