

INTERNSHIP APPLICATION



7666 High School Road NE ♦ Bainbridge Island, WA 98110
Tel 206-842-2306

Date: _____

Name: _____ Home Phone: _____
Last First MI

Permanent Address: _____ Cell Phone: _____
Street

City State ZIP

Email Address: _____ Preferred Method of Communication: _____

Emergency Contact Information: _____
Name Relationship Phone

Driver's License Number: _____ Date of Birth: _____
If required for position State If under the age of 18 years

Have you ever been convicted of a crime involving violence, abuse of a child or vulnerable adult, or dishonesty?

Yes No

AREAS OF INTEREST & AVAILABILITY

Number your top seven areas of interest in order of preference (1 being your top choice)

- | | | |
|---|---|---|
| <input type="checkbox"/> General Recreation | <input type="checkbox"/> 50+ Recreation | <input type="checkbox"/> Planning |
| <input type="checkbox"/> Aquatics | <input type="checkbox"/> Adaptive Recreation | <input type="checkbox"/> Marketing |
| <input type="checkbox"/> Sports | <input type="checkbox"/> Park Services | <input type="checkbox"/> Special Events |
| <input type="checkbox"/> Youth & Teen | <input type="checkbox"/> Sports Field Management | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Outdoor Recreation | <input type="checkbox"/> Trail Construction/Maintenan | |

INTERNSHIP INFORMATION

When would you like to intern? Season(s) _____ **OR** Range of dates available _____
(e.g. fall, winter, spring, summer) (e.g. June 1- August 31)

Number of hours needed for your internship: _____ Do you need District-provided housing? Yes No

This internship is for: School credit Experience Other _____

If your internship is for school credit, fill out the following:

Name of School _____ School Location _____

Advisor _____ Phone _____ Email _____

Education level _____ Major _____ Degree Pursued _____

Why do you want to intern for the Park District? _____

How did you learn of this internship opportunity? _____

INSURANCE INFORMATION

As an intern, you are not covered by the District's Worker Compensation Program through WA State, nor does the Park District's General Liability Insurance cover any injuries to you resulting from your intern duties. You are strongly encouraged to have your own health insurance in the event you are injured while performing your intern duties.

With respect to property damage or injury to third parties, you are covered by the Park District's General Liability Insurance while providing authorized intern service, within the scope of your assigned project to the Park District. The Park District's General Liability Insurance will also cover property damage or bodily injury to third parties in the event of property damage or accidental injury to the public as a result of intern duties assigned by the District. It will also cover property damage or bodily injury to others resulting from an accident should you be asked to drive a District vehicle as part of your intern duties. However, prior to driving a District vehicle you will be required to pass a road test administered by District personnel.

The above liability coverage applies as well if you drive your own vehicle to perform your assigned intern duties, however you must carry your own auto insurance to be eligible for coverage by the Park District's General Liability Insurance.

RELEASE & INDEMNIFICATION

I understand that interning with the District involves inherent risk, which could result in property damage, illness and/or bodily injury (up to and including death), and which includes risk of exposure to and infection by the novel coronavirus, COVID-19. I understand that exposure and infection can result from the actions and/or omissions of me, members of the public, and District employees, agents and contractors, and that infection could result in illness, bodily injury, permanent disability and/or death. Although the District has implemented preventive measures, such as participant screening, social distancing and sanitizing surfaces, risk of exposure and infection cannot be eliminated entirely. If I intern with the District, I hereby (i) assume the risk and all responsibility for my health and safety when interning with the District; (ii) waive and forever release the District and its employees, agents and contractors from any and all claims (including those for illness and bodily injury) arising out of or relating in any way whatsoever to my participation as an intern with the District, even though said claims may arise out of the negligence of the District and its employees, agents and contractors; (iii) limit the District's liability to the limits of the District's insurance policy if the foregoing waiver and release is adjudged to be unenforceable; (iv) agree to defend, indemnify and hold the District and its employees, agents and contractors harmless from and against any and all claims (including those for illness and bodily injury), damages, liabilities and expenses (including attorney fees) arising out of or relating in any way whatsoever to my participation as an intern with the District; and (v) agree to notify the District if I test positive for COVID-19, have been exposed or potentially exposed to COVID-19, or am experiencing symptoms associated with COVID-19, including, without limitation, fever, shortness of breath, cough, and loss of taste or smell.

PHOTOGRAPH PERMISSIONS

I hereby give the District permission to photograph and videotape me while participating as an intern and to use the photographs and video footage for marketing and promotional purposes. I acknowledge and agree that the photographs and video footage will belong exclusively to the District and that I will receive no compensation for the District's usage of the photographs and video footage.

I HAVE READ AND UNDERSTAND THE FORGOING SECTIONS PERTAINING TO INSURANCE INFORMATION, RELEASE & INDEMNIFICATION, AND PHOTOGRAPH PERMISSIONS. TO THE BEST OF MY KNOWLEDGE, THE INFORMATION IN THIS APPLICATION IS TRUE AND COMPLETE. I UNDERSTAND THAT FALSIFICATION OF THIS APPLICATION WILL BE GROUNDS FOR DISQUALIFICATION OF THIS APPLICATION OR DISMISSAL AS AN INTERN.

Signature of Applicant (Adult or Minor)

Date

Signature of Parent or Guardian (if applicant is under age 18)

Print Name

Date

Please ensure that you have fully completed this application. The District reserves the right to disqualify incomplete applications. Submit your completed application with a cover letter and resume as follows:

By regular mail to:

OR

Via email to:

Internship Committee
Bainbridge Island Metropolitan
Park & Recreation District
7666 NE High School Road
Bainbridge Island, WA 98110

info@biparks.org