

Applicant Information			
Last Name: First	t Name:	Date:	
Street Address:	City:	State: Zip:	
Phone: Ema	ail:		
Have you ever been convicted of a crime?			
How did you hear about our internship program?			
Availability			
Morning Afternoon Evening Are Please rank your areas of interest (1 being most Equine/Barn Management	Year: Start Date: End Date: Please explain other eas of Interest interested) ce Management Vocational Program Management		
Experience & Education			
Current Employment Status: Full-Time	Part-Time Not Em	ployed	
Current or most recent paid position:			
Are you a full-time student? Yes No	School:		
Level:	Areas of Study:		

Do you speak any foreign languages?	If yes, please list the language(s):		
☐ Yes ☐ No	Fluent: Semi-fluent:		
	Basic:		
Computer Skills/Software Experience:	l		
and the same of th			
Please describe your experience involving people with disabilities:			
If your area of interest is instructor or equine related, please list your equine/equestrian and/or teaching			
experience:			
Personal I	nformation		
Why are you interested in an internship with JoyRide (Center?:		
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Describe your long-term career goals:		
Personal Reference #1 Name: Relation: Phone: Email:	Personal Reference #2 Name: Relation: Phone: Email:	
Disclaimer & Signature		
I certify that my answers are true and complete to the best of my knowledge. If this application leads to an internship agreement, I understand that false or misleading information in my application may result in my release.		
Signature:	Date:	

Please return this application along with your resume to:

JoyRide Center, Inc.
Attn: Internship Program
29550 Tudor Way
Magnolia, Texas 77355
or email to Blake Lewis, Office Manager, at blake@joyridecenter.org