

 	<p>Tourism Arts and Heritage Cabinet Kentucky Sports Authority 500 Mero Street Frankfort, KY 40601 502-564-4270 ext. 189 Nick Hope Nick.hope@ky.gov</p>
	<p>KENTUCKY SPORTS AUTHORITY INTERNSHIP PROGRAM</p> <p><i>Application</i></p>

Contact Information:

First Name: _____ **Last Name:** _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone (Home): () _____ **(Mobile):** () _____

E-mail: _____ **Age:** _____

School Presently Attending/Location: _____

Status: Freshman Sophomore Junior Senior Graduate Student Other _____

If you will be applying for academic credit, please list the faculty/staff contact with whom you will be working:
(i.e. Professor, Department Head, Advisor, Career Development Counselor, etc...)

Please list any degrees and/or current major: _____

Term interested in working: Fall 20____ Spring 20____ Summer 20____

How did you hear about the Kentucky Sports Authority Internship Program? _____

List the top 3 participating TEAM Kentucky communities in which you would be interested in working:

Are you able to complete the training modules before the start of your internship? Yes No

Do you have a valid Driver's License? Yes No

Have you read the Kentucky Sports Authority Internship Program Guidelines and do you understand your responsibilities as an applicant to this program? Yes No

Kentucky Sports Authority Internship Program

Have you previously volunteered/worked in the sports or tourism industry or attended any related conferences or events? Yes No

If yes, please list your previous experience(s) in the industry:

Special Training/Experience:

<input type="checkbox"/> Website Design/Management <input type="checkbox"/> Sales / Marketing <input type="checkbox"/> Social Media <input type="checkbox"/> Facilities Knowledge <input type="checkbox"/> Database Management <input type="checkbox"/> Customer Relationship Management <input type="checkbox"/> Event Operations <input type="checkbox"/> Other: _____ _____	<input type="checkbox"/> Microsoft Word <input type="checkbox"/> Microsoft Excel <input type="checkbox"/> Microsoft Power Point <input type="checkbox"/> Microsoft Access <input type="checkbox"/> Microsoft Publisher <input type="checkbox"/> Microsoft Outlook <input type="checkbox"/> Other Software: _____ _____
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Education:

School	School Name and Location	Dates Attended		Graduate?	Degree Received
		From	To		
High School				<input type="checkbox"/> Yes <input type="checkbox"/> No	
College University or Other				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Graduate School				<input type="checkbox"/> Yes <input type="checkbox"/> No	

By signing below I hereby certify the following: that all information on this application is true and complete; that I have read and comprehend the Kentucky Sports Authority Internship Program Guidelines; that with the assistance of the KSAIP stipend, I am financially able to support myself through the term of this internship, whether I am located in my home community or in a location elsewhere within Kentucky.

Applicant Signature

Date

**PLEASE RETURN YOUR COMPLETED APPLICATION ALONG WITH
A COPY OF YOUR RESUME, A COVER LETTER, AND AT LEAST THREE REFERENCES TO:**

Kentucky Sports Authority

ATTN: Nick Hope, Sports Marketing Manager

500 Mero Street, Frankfort, KY 40601

Phone: (502) 564-4270 Ext. 189 /Fax: (502) 564-1512

nick.hope@ky.gov