

PLAINFIELD EAST HIGH SCHOOL

Counseling Internship Application

Name: _____

Address: _____

Please send all completed applications to:

Plainfield East High School

Attn: Jill Sperling, Assoc. Principal

12001 S. Naperville Rd.

Plainfield, IL 60585

Or fax to: 815-254-1271

Phone: Home (____) _____ Cell (____) _____

School you are currently enrolled in: _____

Number of hours needed to fulfill coursework: _____

Do you need to work a full-time job while completing your internship? _____

Currently, our school day is from 8:00 a.m. until 3:30 p.m. Please tell us what days and times you generally would be available.

Days	Monday	Tuesday	Wednesday	Thursday	Friday
Time Available					

Would you be able to attend programs after school hours? If yes, please let us know what days and times you generally would be available to participate.

Days	Monday	Tuesday	Wednesday	Thursday	Friday
Time Available					

Do you have flexibility to adjust your schedule if given appropriate notice? _____

If yes, please explain further _____

Please give a short response to the following questions.

1. What skills would you be able to bring to our department? In your answer, please be sure to list your strengths and experiences which will help you during your internship.

2. What do you hope to learn while working in this position? In what areas would you like to gain more experience?

**3. How did you find out about this internship opportunity?
Please list any references working in Plainfield School District 202.**