



INTERN Application

Please complete each section fully and accurately. Use the back of the last page if you need additional space. Please print clearly or type, and remember to sign the application in the space provided at the end of the form. American Conference on Diversity does not discriminate on the basis of race, sex, color, disability, national origin, religion, creed, age, marital status, sexual orientation, citizenship or authorized alien status, or veteran status.

Name
Address
Preferred Telephone Number
Home Telephone Number
Social Security Number
Are you at least 18 years of age? Yes () No ()
Is there anything that will prevent you from performing the essential functions of the position for which you are applying, with or without reasonable accommodations? Yes () No () If yes, please explain:
Intern position applied for
How were you referred to American Conference on Diversity?

Were you ever employed by, or provided volunteer services to American Conference on Diversity?

Yes () No ()

If yes, please let dates and location(s):

Have you ever applied to American Conference on Diversity?

Yes () No ()

If yes, please list date(s) and location(s):

Have you ever been convicted of a felony within the last 7 years?

Yes () No ()

If yes, please explain, including date and location:

Education Please list the school and location, degree/diploma earned or number of years of study completed, and the course of study, for the highest level of education achieved:

Degree/Diploma and Course of Study Or No. of Years

School & Location

Skills and Training Please summarize special job-related skills, training and other qualification from your previous employment or other experience.

Employment *Please list your most recent employers, assignments or other volunteer activities*

Employer

Dates employed

Address

Job Title

Supervisor

Telephone

Duties

Employer

Dates employed

Address

Job Title

Supervisor

Telephone

Duties

Certification

I certify that the information provided in this application is true and complete. I authorize American Conference on Diversity to investigate in this application and to secure any necessary information from all employers, references, academic institutions, and other organizations. I also agree to execute any additional written authorizations necessary for American Conference on Diversity obtain access to and copies of records pertaining to this information. I agree to release any person, company, or other institution from any and all cause of action that otherwise might arise from supplying American Conference on Diversity with information it may request pursuant to this release. I understand that acceptance of my offer to volunteer services to American Conference on Diversity is contingent upon receipt of satisfactory responses to any or all investigations conducted by American Conference on Diversity. I understand that any false answers or statements, or misrepresentations by omission, made by me on this application or any related document, will be sufficient for rejection of my application, or for my immediate discharge if discovered after I begin providing volunteer services. I agree to comply with all applicable policies, procedures and rules of American Conference on Diversity, and I understand that any violation may result in my immediate dismissal as a volunteer. I understand that nothing in this application, or in acceptance of my offer of to volunteer services, is intended to create an employment contract between American Conference on Diversity and me. I hereby acknowledge that I have read and understand the preceding statement.

Signature and Date

**Please forward your completed application
for volunteer service to**

American Conference on Diversity 200
Centennial Avenue, Suite 200 • Piscataway,
NJ 088854 or fax 732-377-2099

American Conference on Diversity Volunteer Application
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