



City of Reno
Parks, Recreation & Community Services
Inclusion and Adaptive Recreation

Intern Program Application

Term of Requested Internship | Fall Spring Summer 20__

Name _____ Phone _____

Address _____ City _____ State _____ Zip _____

Email _____

University _____ Advisor _____

Please answer the questions below as completely as possible. You may attach additional pages if necessary, but please put your name on all pages.

1. When do you want your internship to begin?

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2. Describe your skills / abilities in recreation and leisure? (i.e. sports, outdoor, arts, etc.)

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3. What is your reason for inquiring about an internship at City of Reno Parks, Recreation and Community Services?

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4. What facets of therapeutic recreation interest you the most? (modalities, population, etc.)

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5. What facets of therapeutic recreation interest you the least?

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6. During your internship, are you looking to gain experience in any of the following areas? If so, please explain.

<input type="checkbox"/> Administrative experience (i.e. budgeting, grants, marketing, etc.)
<input type="checkbox"/> Leading/implementing group activities
<input type="checkbox"/> Supervisory experience
<input type="checkbox"/> Other

7. Please write a brief paragraph describing your experience and motivation for choosing Recreation Therapy as your field of study.

8. Are there any personal considerations that may affect your internship placement?

Please submit with your application:

1. Two brief reference letters. These letters should refer to how long, and in what capacity, this person has known you.
2. Resume
3. Your College or University's intern packet of information and expectations.

Complete application package due by:

Fall semester | July 1st • Spring semester | November 1st • Summer semester | March 1st

Signature

Date of Application

Please send your information to:

City of Reno | Parks, Recreation & Community Services Department
Attn: April Wolfe
1301 Valley Road
Reno, NV 89512