

Bethany St. Joseph Care Center

Therapeutic Recreation Internship Application

This internship application is open year-round. To apply, complete this form and email it to our Recreation Director, Tamar Semke, at: tsemke@bsjcorp.com

Name (Last):		(First):	
Address (Street, city	, state, zip code):		
Phone:	Email:	Best time to call:	
Emergency Contact	(Name, phone):	Relationship:	
1		e, number, & email)	
		Minor:	
Semester and year de	esired for internship:	Graduate Student:	
Availability - Are yo	u able to complete your internsh	hip during the following times (Yes or No):	
8:00am	- 4:30pm, Monday - Friday?		
11:30an	n - 8:00pm one night a week dur	ring the last 8 weeks?	
One-hal	f day on a Saturday or Sunday f	for at least 3 times?	
Please share your sk	ills, hobbies, or previous experi	iences:	
			_ _ _
Any Physical limitat	tions we should be aware of? If	Yes, please explain:	
Signature:		Date:	