

ABOVE AND BEYOND FAMILY RECOVERY CENTER



**Above and Beyond**  
Family Recovery Center

# Internship Application

You are embarking upon a journey of deep purpose that will be pivotal in helping the less fortunate of us reclaim their birth rights to self-determination. You will be exposed to unique behavioral modification interactions and therapies that you will be expected to master and consequently administer through the meticulous application of what you are taught, and it all begins with your ability to read instructions and fill out this application properly. In our business, small errors can have huge unwanted ramifications which we have been very successful in avoiding through the proper selection of who accompanies us on our journey. This application will be the first indication to us of "how you do things" and we have come to believe that "how you do some things, is how you do all things."

Therefore, all 4 (four) pages of this application must be completely filled out and signed for internship consideration. This application will be considered incomplete and will not be accepted for candidature if reference is made to a resume, or if the application is not signed by the applicant. A resume is to be submitted with it, along with a one page cover letter explaining your intention and a writing sample of your choice. Thank you.

NATURE of the INTERNSHIP DESIRED: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Please Print **LEGIBLY** (please take your time so we don't have to ask you to fill it out again)

Last Name	First	Previous Surname(s)	Social Security Number (only if hired)	
Street Address		City	State	Zip
E-Mail Address		Home Telephone Number	Cell Telephone Number	
Emergency Contact & Relationship		Home Telephone Number	Cell Telephone Number	

Department you're applying in:  Counselor  Case Management  Volunteer  1099  Administration  Other: \_\_\_\_\_

Have you ever worked for another Addiction Treatment facility?  Yes  No If so, please give company name(s), position titles and employment dates (beginning and final): \_\_\_\_\_

We're open from 8:30 AM to 5 weekdays, what are the maximum days and their hours that you will be able to work (> availability => value to us)?

Monday Morning Hours Available	Tuesday Morning Hours Available	Wednesday Morning Hours Available	Thursday Morning Hours Available	Friday Morning Hours Available
Monday Afternoon Hours Available	Tuesday Afternoon Hours Available	Wednesday Afternoon Hours Available	Monday Afternoon Hours Available	Friday Afternoon Hours Available

Above and Beyond acknowledges students are required to complete a certain number of internship hours, with that said, due to the nature of our organization interns may be asked to extend their stay beyond their required hours so that their end date does not get in the way of provision of services to clients. Will this be a problem?  Yes  No

How far do you live from us and what are your transportation options (please calculate miles and realistic travel times and public transportation research)

Date available to start: \_\_\_\_\_ How many hours are you required to obtain? \_\_\_\_\_

Do you know any past or current interns or employees? \_\_\_\_\_ If so, whom? \_\_\_\_\_

Why have you chosen us? \_\_\_\_\_

Do you have reservations of working on site? If so, please explain the reason(s)? \_\_\_\_\_

What do you know about or think of "Harm Reduction"? \_\_\_\_\_

What do you know of Rational Emotive Behavior Therapy and how do you use it? \_\_\_\_\_

What is your experience using Motivational Interviewing? \_\_\_\_\_

What are your techniques of therapeutic bonding? \_\_\_\_\_

We have a policy of random "dropping" our employees for illegal substances in their system, so it would be only a matter of time before we discover any personal habits which might prohibit your internship. With our willingness to flex based on substance, medicinal need, and the honesty of your answer, we ask for a full-disclosure to our question, "do you consume any drugs (includes alcohol)?"  Yes  No

What and how often? \_\_\_\_\_

What is your "story"? \_\_\_\_\_

**Additional Comments and Things We Should Know About (be frank and honest):**

**Education** (All education will be verified)

Name, City and State of Educational Institution	Graduated?		Type of Degree and Program	Major	Minor	Grade Point
	Yes	No				Overall GPA
High School/GED						
Undergraduate College or University						
Graduate Degrees, Technical/Licenses/Certifications and other noteworthy educational pursuits or accomplishments						

Describe any passions, skills, drives or experiences you believe are relevant to the job applied for: \_\_\_\_\_

Who is your supervisor at school and what is their title and contact information (phone, email)? \_\_\_\_\_

What will be our expected relationship with your supervisor? \_\_\_\_\_

What are your hobbies? How do you spend your spare time? \_\_\_\_\_

How would you depict your purpose or meaning in life? \_\_\_\_\_

# Employment History

(Please complete for all full-time or part-time employment beginning with your most recent  employer)

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Company Name		Telephone #			
Address		Dates Employed	From	To	
Name of Supervisor	May we contact?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Rate of Pay	Start	Last

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State Job Titles and Duties

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Reason for leaving

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State Job Titles and Duties

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Reason for leaving

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## OTHER RELATED EXPERIENCE:

Please explain any gaps in your employment history: \_\_\_\_\_

Have you ever been discharged or forced to resign? Yes  No  If yes, explain: \_\_\_\_\_

Did you receive any discipline in the last 12 months of active employment? Yes  No  If yes, please explain: \_\_\_\_\_

Were you given a performance evaluation within the last 12 months of active employment? Yes  No  If yes, what was the range of scores used and what score did you receive? \_\_\_\_\_

Have you signed any form of non-compete or non-disclosure agreement(s) with any other employer that might cause you problems in working for Above & Beyond? Yes  No  If yes, please explain: \_\_\_\_\_

**(Applicant alone accepts full responsibility for any consequences resulting from improper or illegal contractual behaviors or obligations)**

**Military (Complete only if you served in the military)**

Branch of Service: \_\_\_\_\_ Number of Years/Months of Service: \_\_\_\_\_

Rank at Discharge: \_\_\_\_\_ Date of Discharge: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

Describe any military skills, training or experience you believe are relevant to the job applied for: \_\_\_\_\_

**Applicant Acknowledgement**

I certify that the answers given herein are true and complete to the best of my knowledge. I understand that any misrepresentations, omissions of facts or incomplete answers in this, or any application document, will disqualify me from further consideration for internship without notice. I further understand that, if accepted, any misrepresentations or omissions of facts which are discovered later will be cause for my dismissal.

I understand that as an intern, I am not entitled to participate in any of the benefit plans provided by the Company, including but not limited to vacation and sick pay and/or the Company group health plan. I acknowledge that I have received and it is my responsibility to become familiar with 1) Sexual Harassment Policy 2) Company Harassment Policy 3) E.E.O. Policy 4) Rules of Conduct 5) Company Confidentiality Agreement and 6) Agreement to Mediate/Arbitrate.

I understand that this is an "at will" relationship and is not for a specific term. It may be terminated by me or my Employer(s) with or without notice or cause at any time. I further understand that no oral promise, Employer(s) policy, custom, business practice or other procedure (including the Intern Handbook or any personnel manuals) constitutes an employment contract or modification of the at-will employment relationship between myself and my Employer(s).

I understand that applicants for certain positions may be required to qualify for employment based on additional employment criteria. For example, I may be required to take job-related tests, i.e.; take medical tests; allow background investigations; take spontaneous drug tests; and others. If I am offered Internship or begin before any required test is completed, my internship is contingent on sustained satisfactory results on all eventual tests. I authorize the release of any background check and results of any drug/alcohol test to any state or federal authority requesting such information or in response to a valid subpoena or other legal request.

**Above all**, I promise without exception, to treat all Above and Beyond clients and employees with respect, dignity, and kindness. I also promise to smile, give until it hurts and then some, and to radiate healing expressions at all times.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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