

Therapeutic Recreation Intern Application

Please complete the following information and submit with:
Resume, Letter of intent/cover letter, and 1 letter of recommendation
to the Internship Coordinator, April Crowder, CTRS, at
2575 South 7th Street, La Crosse WI 54601.

You can also contact April at Amcrowde@gundersenhealth.org,
by phone at (608)406-3926 or by fax at (608)406-3910.

Date_____

Name_____

Last	First	Middle Initial
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School Address_____

City	Street	State	Zip Code
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Permanent Address (if different than school)_____

City	Street	State	Zip Code
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Telephone No._____ Email_____

Birthdate (optional)_____ SS#_____

Name of College/University_____

Address_____

City	Street	State	Zip Code
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College/University Advisor_____ Telephone No._____

Advisors Email_____

General Questions

Length of Internship required by College/University_____

Available Start Date_____

Ending Date_____

Are you licensed to operate a vehicle? Yes_____ No_____

Please describe experiences you have had working with people with disabilities, and in what capacity (setting, length of time, age level, type of population)

Briefly summarize your work/volunteer experience working with older adults (be specific).

What made you choose Bethany Riverside as a possible sight to complete your internship experience?

What role do you feel Recreation Therapy plays in a Long Term Care setting?

Provide a statement of your career objectives

What sets you apart and makes you unique from others that may apply for this position?

Student's Signature

Date

Return Application to:
Bethany Riverside Attn: April Crowder
Therapeutic Recreation Department
2575 South 7th Street
La Crosse, WI 54601