



PO Box 93, West Bend, WI 53095    (262)346-8471 Phone    (262)346-8226 Fax

**Applicant Name:**

**Previous Names Used:**

**Current Address:**

**Phone Number:**

**Email Address:**

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**College Name:**

**Major:**

**Internship Contact Person:**

**Anticipated Start Date:**

**End Date:**

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***Please answer the following questions. Please use extra paper if needed to continue your response.***

Why do you want to intern with Aspired, Inc.?

What other internship experiences have you had?

What courses have you had, that you feel would directly relate to your internship with Aspired, Inc.?

What, if any, nonprofit experience do you have?

Are you seeking a job offer upon completion of your internship with Aspired, Inc.?



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Have you ever been convicted of any crime? If yes, please explain.

What, if any, experience do you have working with addiction?

Do you feel that you work better independently or with supervision? Explain.

What do you hope to get out of this experience?

Would you be comfortable performing supervised drug screens?

Unfortunately, working in this field, some clients will deflect accountability and become hostile towards staff. How would you handle this?