Please Print

Business/Organization Name: __________________________________________

Department Name: ____________________________ Director’s Name: ________________

Little Rock Address: _______________________________ Zip Code: ____________

Telephone: _________________________________________ Fax: __________________

E-Mail Address: __________________________________________ Total # Summer Jobs Requested _________

PLEASE FILL OUT A SEPARATE APPLICATION FOR EACH DIFFERENT WORKSITE.

Immediate Supervisor: ___________________________ Title _________________________

Worksite Address: _______________________________ Zip Code ________________

Telephone: _________________________________________ Fax: __________________

E-Mail Address: __________________________________________

List each position available. Please attach the job description for each one.

1. __________________________________ 2. __________________________________

3. __________________________________ 4. __________________________________

Is there an age requirement?  No [ ] Yes [ ] Required Age ______

Are there special skills required? (Please list: e.g., typing, computer skills, etc.)

1. __________________________________ 2. __________________________________

3. __________________________________ 4. __________________________________

If requesting a returning worker, list name of youth: _____________________________

How many years has this person worked at your location? __________ 
(NOTE: Intern can only work for 2 years at the same location)

What are the requested work hours?

[ ] Full-Time: Maximum hours authorized to work: 8 hours a day; 32 hours a week (Monday – Thursday)

[ ] Part-Time: 4 hours a day; 16 hours a week (Monday – Thursday); Prefer Mornings [ ] Afternoons [ ]

Can you directly hire at least ONE youth intern to help us increase the number of students placed?

Yes [ ] No [ ]

Please return this form to:

Michael Sanders, Community Resources Manager

City Hall, Suite 220W

500 W. Markham Street, Little Rock, AR 72201

Phone: (501) 399-3442 • Fax: (501) 399-3425

Michael Sanders <masanders@littlerock.gov>