



INTERNSHIP APPLICATION

NAME _____ **DATE OF BIRTH** _____

ADDRESS _____

COLLEGE/UNIVERSITY _____

HOME PHONE _____ **SCHOOL PHONE** _____

Which program are you applying for? (Check one)
Summer _____ Fall _____ Winter _____ Spring _____

Are you currently enrolled in a graduate or undergraduate program? _____
*If yes, please fill out the questions below

What is your major? _____

What grade are you in? _____

If you are not currently enrolled in a graduate or undergraduate program, please answer the questions below.

What is your current level of education? _____

Are you currently employed or participating in another internship? _____

If yes, please provide the name of the company and its contact information.

If no, please provide the name and contact information of your last employer.

Please list all relevant strength and conditioning experience. (Include sports you have participated in or coached in.)

***Please note that all interns must sign a non-compete waiver in order to participate in our program.**

***Please contact Erik Kaloyanides (781-789-9883)/erik@athletic-evolution.com or complete the application and mail to the address above.**

