



# A.S.K. Internship

**Thank you for your interest in interning with A.S.K.  
Please read the information below and send the  
completed application to ASK Office.**

## **Company Description**

Autism Solutions for Kids (A.S.K.) is a Non Public Agency providing intervention and support to children and families with Autism. ASK prides itself in utilizing a "team" approach and welcomes applicants who are seeking a meaningful position with a dedicated group of people.

## **Internship Description**

Interns at A.S.K. will provide support and interact with children that have been diagnosed with Autism. This support will be provided in the community at various outreach events and provide an opportunity to spread Autism awareness. The internship will consist of 0-6 hours a week and is on an as needed basis. Area of internship includes:

1. Community Outreach – volunteer in community events
2. Interaction Support – assist in childcare during parent support groups
3. Marketing – social network, public relations, develop new marketing strategies
4. Data Support – data entry, data analysis, and graphing

Depending on the school site, course credit may be available; a letter of recommendation is available upon request.

## **Qualifications**

- Applicants must be at least 18 years old with high school diploma or better.
- Applicant should have reliable transportation and proof of TB clearance.
- There is a 3 month commitment required.

**How to Apply:** Email completed application with resume to [intern@ask4aba.com](mailto:intern@ask4aba.com) or FAX to 949-474-4314 \* Application can be downloaded at [www.ask4aba.com/jobs/internapp.pdf](http://www.ask4aba.com/jobs/internapp.pdf)

\*\* No phone calls please. Due to the volume of applicants, we will contact only those candidates with qualified experience who have submitted a resume and completed an application. Thank you for your interest and understanding.

**When to Apply:** ASAP

## Contact Info:

Autism Solutions for Kids  
2082 Business Center Drive, Suite 255  
Irvine, CA 92612  
[www.ask4aba.com](http://www.ask4aba.com)



**A.S.K. INTERNSHIP APPLICATION**

**Applicant Information:**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_  
 Drivers license #: \_\_\_\_\_ State issued in: \_\_\_\_\_

**Emergency Contact Information: Who should be contacted if you are involved in an emergency?**

Contact Name: \_\_\_\_\_ Relationship to you: \_\_\_\_\_  
 Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Field of Interest: please rank in order of interest (1=most preferred) and list applicable skills**

		Abilities/Skills
_____	Community Outreach – volunteer in community events	_____
_____	Interaction Support – assist in childcare during parent support groups	_____
_____	Marketing – social network/PR, develop new marketing strategies	_____
_____	Data Support – data entry, data analysis, and graphing	_____

**Background Questionnaire**

Have you applied to our company previously? \_\_\_\_\_ Yes, on (date): \_\_\_\_\_ \_\_\_\_\_ No  
 Are you at least 18 years old? \_\_\_\_\_ Yes, on (date): \_\_\_\_\_ \_\_\_\_\_ No  
 Have you ever been convicted of a felony? \_\_\_\_\_ Yes, on (date): \_\_\_\_\_ \_\_\_\_\_ No  
 Do you have reliable transportation? \_\_\_\_\_ Yes \_\_\_\_\_ No  
 If you are offered the internship, when would you be available to begin? \_\_\_\_\_  
 Are you fluent in any other language(s)? \_\_\_\_\_ Yes \_\_\_\_\_ No Ability or Rating  
 If yes, what language(s)? \_\_\_\_\_ 1 2 3 4 5

**Intern Availability: please list the hours you are available**

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
a.m.							
p.m.							

**Education and Training**

	High School				College				Other:
Name of School									
Location of School									
Years Completed	9	10	11	12	1	2	3	4	
Diploma / Degree obtained									
Major Course(s) of Study									

Other Notes on Training (Graduate, Technical, Vocational):

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**Skills :** please describe your experience and rate your ability in the following skill areas

Skill	Years of Experience	Ability or Rating
[ ] Working with Children	_____	1 2 3 4 5
[ ] Developmental Disabilities	_____	1 2 3 4 5
[ ] Knowledge of Autism	_____	1 2 3 4 5
[ ] Marketing/PR	_____	1 2 3 4 5
[ ] Data Analysis	_____	1 2 3 4 5
[ ] Computer literacy	_____	1 2 3 4 5

*circle the programs/skill that you're proficient in:*

MS Word      MS Excel      MS PowerPoint      Internet Research      Photo Imaging

**Employment Experience:** Start with your present or most recent positions, please list your professional experience working with children.

Name of Employer		Dates Employed
Job Title		From                  To
Reason for Leaving		

Name of Employer		Dates Employed
Job Title		From                  To
Reason for Leaving		

**Professional/Academic Reference Information:**

Name		
Company/Title		
Relationship		
Phone		

**Additional Information**

Please provide any other information that you believe should be considered.

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