**Internship Application Form**

|  |
| --- |
| *Name of Higher Education Institution (HEI)* |

**P E R S O N A L D E T A I L S**

|  |
| --- |
| *Name of Applicant* Last Name First Name/s Middle Name |

|  |
| --- |
| *Complete Home Address* |
| *Date of Birth (Date Month Year)* | *Place of Birth* | *Age* | *Gender* |
| *Contact Number (Personal Mobile)* | *Contact Number (Landline)* |
| *Email Address (Primary Contact)* | *Email Address (Secondary Contact)* |

**I N T E R N S H I P D E T A I L S**

|  |
| --- |
| *Kindly indicate the ‘Internship Track’ approved by your school by ticking the appropriate box.*  Physical Internship  Remote/Virtual Internship  Blended Internship |

|  |  |
| --- | --- |
| *Course / Degree* | *Preferred Deployment Unit (Primary)* |
| *Preferred Deployment Unit (Secondary)* |
| *Length of Internship (SEC Policy: Minimum of 250 hours)* | *Inclusive Dates (Duration)* |

The following forms and/or documents are attached to highlight details of the applicant:

1. Application Letter addressed to Internship Program Director ( )
2. Form 102. Essay Questionnaire ( )
3. Form 103. Medical/Health Certificate (with COVID vaccination status) ( )
4. Form 104. Personal Data Sheet (CS Form No. 212, Revised 2017) ( )

|  |  |
| --- | --- |
| **APPLICANT’S CERTIFICATION**I hereby certify to the truthfulness and correctness of the information stated above to the best of my knowledge, including information stated in the attached documents and/or forms.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Applicant’s Signature over Printed NameDate \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **SCHOOL ENDORSEMENT**On behalf of the University/College, I most respectfully endorse this application for consideration of the Review and Selection Panel of the SEC Internship Program.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_HEI’s Authorized RepresentativeDate \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**ACTION OF THE PROGRAM MANAGEMENT TEAM**

|  |  |  |
| --- | --- | --- |
| *Date of Interview* | *Time* |   Physical Interview  Virtual Interview |
| *Type of Internship*  Regular (Undergraduate)   Specialized (Law) | *Findings and Recommendation*  APPROVED   DISAPPROVED | *Remarks* |

|  |  |
| --- | --- |
| **Marjorie C Dacillo**SEC Training Officer III, HRAD-LRID*Program Manager, SEC Internship Program*Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Filbert Catalino F Flores III**SEC Director III, HRAD*Program Director, SEC Internship Program*Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

1. **Internship Details**

|  |  |
| --- | --- |
| Approved Internship Track |  |
| Approved Length of Internship |  |
| Inclusive Dates | *Start* | *End* |
| *Reporting Schedule*  Monday  Tuesday  Wednesday  Thursday  Friday |
| *Work Hours per Week* | *Start* | *End* |
| *Remarks* |

1. **Placement Details**

|  |  |
| --- | --- |
| Department/Office |  |
| Division/Unit |  |

|  |  |
| --- | --- |
| Supervisor/Mentor (Principal)*(Must be a regular/permanent employee)* |  |
| Job Title |  |
| *Email Address* | *Contact Number* |

|  |  |
| --- | --- |
| Supervisor/Mentor (Alternate)*(Must be a regular/permanent employee)* |  |
| Job Title |  |
| *Email Address* | *Contact Number* |