



## CIHL 2018-2019 INTERN PROGRAM APPLICATION FORM

### Instructions:

- Please read the instructions carefully
- Answer each question clearly and completely
- Incomplete Applications will not be considered

### ***Personal and Contact Details***

1. Name (First, Last): \_\_\_\_\_
2. Date of Birth (yyyy-mm-dd): \_\_\_\_\_
3. Nationality: \_\_\_\_\_
4. Current or Last Team: \_\_\_\_\_
5. Mailing Address: \_\_\_\_\_
6. Telephone Number: \_\_\_\_\_
7. E-mail Address: \_\_\_\_\_
8. Do you have a passport that is valid at least six months **after** the end date of the internship (April 30, 2019) ? (please circle)  
Yes    No
9. What is your area of interest and which industry would you like to work in? Indicate your preferences by marking the companies 1 (first choice) through 4 (last choice). Please refer to [cihl.com/intern](http://cihl.com/intern) for more details on the companies and the internships provided.

*Should your application be successful we will endeavor to place your preferred internship but no guarantees will be made.*

- ( ) Internet and Technology
- ( ) Private Equity
- ( ) Sports Management
- ( ) General

10. What is your mother tongue: \_\_\_\_\_

11. Do you speak any other languages? If so please indicate below.

\_\_\_\_\_



**Educational Details**

1. What is the name of your last school/college/university you attended?

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2. What is the highest level of education you have completed?

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3. What were your top three subjects and what grades did you achieve?

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4. What subject(s) interest you?

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**Work and Volunteer Experience**

Please list your work experience below. Please be sure to attach an updated *curriculum vitae* along with this application form. Please feel free to include all types of experiences – from coaching to summer jobs and other internships. If you need more space, please continue on a separate page and attach with your application.

From: Month/Year	To: Month/Year	Name and Address of Employer	Type of Business
Description of your Duties			
From: Month/Year	To: Month/Year	Name and Address of Employer	Type of Business
Description of your Duties			



**Emergency Contacts**

Please list the names and contact details of your emergency contacts during the internship period (September 1 2018 – April 30 2019).

Full Name	Full Address	Telephone Number

**Criminal Activity**

Have you ever been arrested, indicted, or summoned into court as a defendant in a criminal proceeding, or convicted, fined, or imprisoned for the violation of any law - excluding minor traffic violations? (circle one)

Yes      No

If "YES", give full particulars of each case.

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**Authorization**

I certify that the statements made by me in answer to the above questions are true, complete, and correct to the best of my knowledge and belief. I understand that any misrepresentation or omission of information could result in my CIHL Internship being terminated.

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Please direct all applications and inquires to [jeff@cihl.com](mailto:jeff@cihl.com).