

Application Process

Please include all of the following items in your completed packet. A complete application will include the following in **one (1) package/envelope or one (1) scanned e-mail**. Packets that arrive piecemeal will reflect poorly on your acceptance:

- Completed and signed application form
- Unofficial School Transcripts
- Up to 5 examples of artwork, your portfolio or an audio/video recording of a performance if you are in the Dept. of Fine Arts, or if they are available to you.
- Completed Self-evaluation. The three reference evaluations may arrive per your reference's sending.
- 1-2 page essay explaining your thoughts on Creative Arts in Healthcare; regarding the goals you have for this internship and the connection this internship poses to your career after university.
- Professional resume.

Program Acceptance

Applicants will have the opportunity to tour the program and ask any questions they have prior to acceptance. Upon unofficial acceptance of the internship, Sanford Center for Learning and Innovation will contact students and their university internship advisor. They will work together to complete an agreed upon set of goals and expectations. All necessary administrative agreements must be completed before the student may begin said internship. Interns will be held to the same standards and policies as employees of Sanford Health with regard to confidentiality, HIPPA, and departmental policies and procedures.

Submission of Application

I certify that all information provided in this application is complete and correct to the best of my knowledge. I understand that any false statements on this application shall be sufficient cause for rejection of my application for this internship program, or immediate discharge from the program once discovered.

I, the undersigned applicant, do, hereby authorize my former supervisors and above named references to release any and all information pertinent to this application process, including but not limited to, my qualifications and experience, quality of performance, and professional and personal conduct. I hereby extend absolute immunity to, release from all liability, discharge, exonerate, and agree not to sue Sanford Health, Sanford Arts, and/or their employees, agents, or representatives, for any action that results from the release of information by such supervisors and references as identified above.

Applicant's signature _____ Date _____

All completed applications must be sent in prior to the deadline noted on Page 1 of this application. It is the sole responsibility of the applicant to ensure the completed application has been received.

Please return completed application and materials to:

Jessie Park or scan and e-mail to Jessie.Park@SanfordHealth.org
1305 W. 18th St
Route # 6881
Sioux Falls, SD 57104

Please direct any questions to 605.328.6071 or Jessie.Park@SanfordHealth.org

Sanford does not discriminate against any applicant to an internship position because of race, gender, religious preference, sexual orientation, disability, or age. Sanford Health complies with all laws pertaining to non-discrimination and equal opportunity employment.



Sanford Arts Internship Application.

Please type or print clearly.

Seeking an internship for the selected term(s):		Application Deadline:
<input type="checkbox"/>	Spring 2017	Rolling
<input type="checkbox"/>	Summer 2018	May, 2018
<input type="checkbox"/>	Fall 2018	July, 2018
<input type="checkbox"/>	Spring 2019	December, 2018

Please contact Jessie Park at Jessie.Park@SanfordHealth.org or call 605.328.6071 for more information.

Name:

Phone (Cell):

Phone (Other):

Address:

City:

State:

Zip:

Email Address:

Academic Background

University/College:	Dates Attended (MM-YY) From: To:
Major(s):	Minor/Area of Emphasis:
Graduation date (anticipated):	

Applicable Coursework

Courses listed are not limited to the following: Fine Art, Psychology, English, Theater, Music Education/ Performance, Dance performance, Child Development, Art Therapy and Expressive Therapies.

Course Title	Grade Earned
1.	
2.	
3.	
4.	
5.	
6.	
7.	

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Employment History

Please list relevant current or previous employment including, but not limited to the following: Positions relating to the Arts, Human Services, Health Care setting, etc.:

<i>Place; Position; Supervisor</i>		<i>Dates worked</i>
1.		
2.		
3.		

Professional, School and Community Involvement

List organizations and leadership experiences you are currently or recently have been involved in:

References

Please provide three (3) letters of reference in sealed and signed envelopes, including at least one from a professor. Family members or spouse should not be used for letters of recommendation.

Reference #1:

Phone Number:

Reference #2:

Phone Number:

Reference #3:

Phone Number:

Others (please list name and phone number):

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Essay

Please explain your thoughts, as they pertain to this internship, in Arts and Healthcare; how you would like to put those thoughts into action while at Sanford Arts and what your current aspirations are pertaining to a possible career in the Arts and/ or Arts and Healthcare.

Prompts to possibly include in your essay:

- Major Accomplishments within your emphasis or in a health care setting
- Examples of your flexibility in the workplace
- Creativity (both within the arts and other contexts)
- Ability to adapt in a constantly changing environment
- Willingness to work with others
- Leadership experiences
- Any other information you feel is important in order for us to get the best snapshot of you!
- Self-starting behaviors/initiative

Faculty Advisor Support

Faculty Advisor:	Department:
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To be completed by the Faculty Advisor in addition to evaluation form (attached):

I support _____'s interest in and application to the Sanford Arts internship program.

- Student plans to pursue academic credit for this internship program.
- Student does not intend to pursue academic credit and will instead apply for this opportunity as a volunteer for service.

I can be contacted at (phone) _____ or by email _____ as a reference regarding this application.

Additional Comments:

Signature: _____

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