

**BAY AREA CHAPTER**



NORTH BAY SAN FRANCISCO GREATER OAKLAND  
SAN MATEO SANTA CLARA

**SHEET METAL & AIR CONDITIONING  
CONSTRUCTION INDUSTRY**

**2018 INTERN APPLICATION**

**Attach Resume we can share with our members**

Name \_\_\_\_\_  
Last First

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Name of School: \_\_\_\_\_

Declared College Major: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

1. If hired as an Intern, are you able to furnish proof of age via a work permit or certificate of age? (Minimum Age Requirement is 16 years old) Yes \_\_\_ No \_\_\_

2. Are you interested in working in: (check all that apply)

\_\_\_ engineering; \_\_\_ estimating; \_\_\_ purchasing; \_\_\_ project management;  
\_\_\_ accounting; \_\_\_ architecture; \_\_\_ administration; \_\_\_ shop and/or field (18 & up)

3. Are you interested in working: Part-time \_\_\_\_\_ Full time \_\_\_\_\_ Either \_\_\_\_\_

**Continue to Page 2 >>>**

4. What cities/counties would you be willing to travel to in the Bay Area for an Intern Position?:

San Jose/Santa Clara       San Francisco       North Bay  
 San Mateo Peninsula       East Bay       Any

5. When are you available to start work? \_\_\_\_\_

Would you like to work during:  Summer;  Academic Year;  Both

6. Some shops may require a drug screening test. Are you willing to take this test?

a. Yes      b. No

7. Do you have any physical limitations that might affect work performance which should be considered in internship placement? Please explain: \_\_\_\_\_

8. Do you have any experience in: (check all that apply)

**Office:**

filing  
 bookkeeping  
 computer skills  
 Word  
 Excel  
 CAD

**Construction:**

mechanical aptitude (cars, model building)  
 construction experience  
 tool knowledge  
 metal shop or industrial arts class

other : \_\_\_\_\_

9. Did you participate in this program last year?  Yes  No

If yes, who did you work for? \_\_\_\_\_

10. Any additional information you'd like us to know: \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Return application to:  
Marlena Petrich  
Bay Area SMACNA  
7677 Oakport St., Ste 805  
Oakland, CA 94621  
510-635-8212 Tel  
510-635-0320 Fax  
mpetrich@bayareasmacna.org

Referred to Program by:  School  
 Career Fair  
 Friend/Relative  
 Other