



## El Olam's Exquisite Properties, LLC Student Internship Application

### Intern Application:

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

Current Address \_\_\_\_\_

Street Apt. # \_\_\_\_\_

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

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_\_) \_\_\_\_\_

Mobile Phone (\_\_\_\_\_) \_\_\_\_\_ E-Mail \_\_\_\_\_

Date of Birth Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_ SSN \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Parent or Guardian Name \_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_\_) \_\_\_\_\_

### Education:

Please check your Education Level:

High School \_\_\_\_\_ Undergrad \_\_\_\_\_ Graduate school \_\_\_\_\_

Current Cumulative Grade Point Average: \_\_\_\_\_ / 4.0 Scale or \_\_\_\_\_ / \_\_\_\_\_ Scale

High School Graduation or GED Completion Date: Month \_\_\_\_\_ Year \_\_\_\_\_

School Name \_\_\_\_\_

School Address \_\_\_\_\_

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

Year of Office Work Experience? \_\_\_\_\_

### Work Experience:

Employer:	Address:	Phone Number? Contact Person:

<b>Employer:</b>	Address:	Phone Number? Contact Person:
<b>Employer:</b>	Address:	Phone Number? Contact Person:

### Licenses and Certifications

License Or Certificate	License or Certificate Number	Effective and Expiration Dates

Are you a US Citizen?	Yes	No
Are you over 18 Years Old?	Yes	No
Have you been convicted of a crime in the past ten years? Excluding misdemeanors and summary offences, which has not been annulled, expunged or scaled by a court? Yes                      No		
Driver's License Number:                      State:                      Expiration Date:		
<p>The Information provided in this application for internship is true, correct and complete. If employed, any misstatement or omission of fact on this application may result in my dismissal.</p> <p>I understand that acceptance of an offer to be an intern does not create a contractual obligation upon EOEP to continue to employ me in the future.</p> <p>If you decide to engage an investigating consumer reporting agency to report on my credit and personally history I authorize you to do so.</p> <p>If a report is obtained you must provide, at my request, the name of the agency so I may obtain from them the nature and substance of the information contained in the report.</p>		
_____ Date		_____ Signature

Interviewer Name and Comments	Disposition
First Name:	Position Offered: Accepted: _____ Date
Last Name:	Position Denied: _____ Date
Comments:	Comments:

If interested, please submit your Intern Application, Cover Letter and resume to:

**MAIL COMPLETE APPLICATIONS TO:**

**El Olam's Exquisite Properties, LLC.**

Scholarship Committee

P. O. Box 7574

Garden City, NY 11530

**Or** email at EOEP2023@gmail.com