



171 MONROE AVENUE NW / SUITE 700 / GRAND RAPIDS MI / 49503 / P 616.233.3560 / F 616.459.0562 / WWW.WESTMICHIGANSPORTSCOMMISSION.COM

## **INTERNSHIPS**

The West Michigan Sports Commission is committed to providing an internship experience which will acquaint students/recent graduates to the working environment of the youth and amateur sports industry, while providing them with hands-on experiences in sporting event management and promotion.

A variety of responsibilities are offered to interns. Current internships are full-time and part-time. Each internship differs and the time commitment will be agreed upon with the individual supervisor.

### **DESCRIPTION OF DUTIES**

Internship duties include but are not limited to: event operations and administration, logistics, event bid preparation, database entry, volunteer recruitment and management, hospitality, meeting planning, writing press releases and follow-up with media, creating media kits, and general support.

### **REQUIREMENTS**

Any student who has recently graduated from an accredited college or university or any student who is currently enrolled in or accepted to an accredited graduate school or any undergraduate student who is currently enrolled or accepted to an accredited college or university.

### **APPLICATION PROCESS**

All applicants must submit the following information to apply for an internship with the West Michigan Sports Commission: Internship application, resume and collegiate transcripts (can be a copy). Selected applicants will be contacted and interviewed at the West Michigan Sports Commission offices. Application deadlines are as follows:

<u>Timeframe</u>	<u>Application Deadline</u>
January – May	December 1
May – August	April 1
August – December	July 1

All materials are to be sent to:

West Michigan Sports Commission  
Attn: Eric Engelbarts II  
171 Monroe Avenue NW, Suite 700  
Grand Rapids, MI 49503

Any questions can be emailed to Eric Engelbarts II at [eengelbarts@westmisports.com](mailto:eengelbarts@westmisports.com) or call 616-233-3563.



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### Application for Internship

#### Part I

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

Address: \_\_\_\_\_

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

Contact information: School E-mail: \_\_\_\_\_

NON-School E-mail: \_\_\_\_\_

Cell phone: (    ) \_\_\_\_\_ Day phone: (    ) \_\_\_\_\_

Internship semester:    Jan-May \_\_\_\_\_    May-Aug \_\_\_\_\_    Aug-Dec \_\_\_\_\_

#### Part II

College/University: \_\_\_\_\_ Graduation Date (exact): \_\_\_\_\_

Major: \_\_\_\_\_ Minor: \_\_\_\_\_ G.P.A. overall: \_\_\_\_\_ G.P.A. Major: \_\_\_\_\_

Degree: \_\_\_\_\_ BS/BA    \_\_\_\_\_ Masters

Internship Coordinator / Supervising Professor: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: (    ) \_\_\_\_\_

Mailing address: \_\_\_\_\_

For your college, are there minimum or maximum requirements?

What are the minimum hours worked per week \_\_\_\_\_ what are the minimum number of weeks? \_\_\_\_\_

Are you doing this for Academic Credit? \_\_\_Yes \_\_\_No

Are you taking this internship as a graduation requirement? \_\_\_Yes \_\_\_No

Will you be taking classes while doing this internship? \_\_\_Yes or \_\_\_No

If yes, is it ONLY an ON-Line Class? \_\_\_Yes \_\_\_No



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**Part III**

**Computer skills (0=never used; 1=played with; 2=used for one project; 3=used frequently; 4=expert):**

<b><u>Basic</u></b>	<b><u>Graphics</u></b>	<b><u>Website Development:</u></b>	<b><u>Other Software:</u></b>
MS Word _____	Illustrator _____	MS Front Page _____	_____
MS Excel _____	PageMaker _____	HTML Code _____	_____
MS Access _____	Publisher _____	Quark _____	_____
Adobe Acrobat _____	In-design _____	Photoshop _____	_____

**Part IV**

**Will you be working another job while doing this internship? \_\_\_Yes \_\_\_No**

**Do you need housing during this internship? \_\_\_Yes \_\_\_No**

**If not, where will you live or what options do you have during the internship (exact address required)?**

\_\_\_\_\_

**If the WMSC cannot provide housing, can you find housing on your own? \_\_\_Yes \_\_\_No**

**Are you expecting to be paid? \_\_\_Yes \_\_\_No If so, how much? \_\_\_\_\_**

**What is the earliest that you can begin (exact date required)? \_\_\_\_\_**

**What is the latest day you can work until (exact date required)? \_\_\_\_\_**

**Are you able to work at least 40 hours a week M-F and weekends? \_\_\_Yes \_\_\_No**

**If not, what can you work? \_\_\_\_\_**

**Activities/interests: \_\_\_\_\_**

\_\_\_\_\_

**List Special skills, abilities or certificates: \_\_\_\_\_**

\_\_\_\_\_

**What are your qualifications to work as an intern at the WMSC? \_\_\_\_\_**

\_\_\_\_\_



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**What do you expect to learn and experience at the WMSC?** \_\_\_\_\_

**Previous volunteer and not-for-profit experience:** \_\_\_\_\_

**Do you have current certifications or licenses of any of the following?**

- Drivers License\_\_\_\_
- Basic First Aid CPR Certification\_\_\_\_
- Advanced First Aid CPR\_\_\_\_
- Other Medical Training \_\_\_\_ List\_\_\_\_\_
- Sports expertise\_\_\_\_ List\_\_\_\_\_
- Other special training: \_\_\_\_\_

**Part V**

Please list three references that can attest to your character, work ethic, integrity and skills. Only one can be from a professor.

1) Full Name: \_\_\_\_\_ Relationship to yourself: \_\_\_\_\_

Email address: \_\_\_\_\_ Daytime telephone number: (    ) \_\_\_\_\_

2) Full Name: \_\_\_\_\_ Relationship to yourself: \_\_\_\_\_

Email address: \_\_\_\_\_ Daytime telephone number: (    ) \_\_\_\_\_

3) Full Name: \_\_\_\_\_ Relationship to yourself: \_\_\_\_\_

Email address: \_\_\_\_\_ Daytime telephone number: (    ) \_\_\_\_\_