

INTERNSHIP REQUEST FORM

(Section 1) Requesting Department Information

Department/Division	Department of Social Services
Mission Statement	We promote self-sufficiency and assure the protection of vulnerable individuals. We value the needs of our customers, the contributions of our staff and the participation of our community. We achieve our goals through a culture which encourages continuous improvement.
Contact Person Information	Name: Jodi Bouyea Title: Coordinator of Volunteer Services Email: jbouyea@co.broome.ny.us
	Phone: 607-778-2681 Fax: 607-778-2710 Address: 36 - 42 Main Street, Binghamton, NY 13905
Send Applications Via	<input checked="" type="checkbox"/> Email <input checked="" type="checkbox"/> Phone <input type="checkbox"/> Fax <input type="checkbox"/> Mail
Date Form Completed	8/31/07

(Section 2) Internship Information

Position Name	Medical Services intern
Job/Project Description	Assist with client education, outreach and enrollment activities for the Department's Medicaid Managed Care Program.
Experience/Skills Desired	Good communication skills, interviewing skills, writing skills. Counseling/human service background helpful.
Additional Notes	
Time Preference	<input type="checkbox"/> Part Time <input type="checkbox"/> Full Time <input checked="" type="checkbox"/> No Preference

(Section 3) Compensation

***Interns must be paid according to the current year's pay schedule and according to classification**

Compensation*	Unpaid
School Credit	<input type="checkbox"/> Credit <input type="checkbox"/> Non-Credit <input checked="" type="checkbox"/> No Preference

(Section 4) Internship Availability – Check All That Apply

Type of Intern Desired	<input type="checkbox"/> HS <input checked="" type="checkbox"/> College <input checked="" type="checkbox"/> Grad <input type="checkbox"/> Law
# Of Positions Available	1
Time Period	Spring