



RPP Intern Application

Applicant Information

Last Name _____ First Name _____ MI _____ Date _____

Street Address _____ Apartment _____

City _____ State _____ Zip Code _____

Phone _____ E-mail Address _____

How did you hear about the RPP Internship? _____

Which session are you applying for? Winter/Spring ____ Summer ____ Fall ____ Year _____

Are you a citizen of the United States? ____ If not, are you authorized to work in the U.S.? ____

Have you ever had your professional license disciplined or revoked? Yes ____ No ____

If yes, please explain _____

Have you ever been convicted of a crime? Yes ____ No ____

If yes, please explain _____

Education

High School _____ Address _____

From _____ To _____ Did you graduate? ____

College _____ Address _____

From _____ To _____ Did you graduate? ____ Degree _____

College _____ Address _____

From _____ To _____ Did you graduate? ____ Degree _____

Rockland Peak Performance Inc.
174 Route 17 North, Sloatsburg, New York 10974
(845) 712-5415
www.RocklandPeakPerformance.com

Certifications, Internships, Other

Please list any additional professional certifications (ATC, CPT, NASM, CSCS, etc.) _____

Please list certifications achieved through continuing education (FMS, SFMA, etc.)

Please list any prior internships with dates _____

References

1. *Full Name* _____ *Relationship* _____

Company _____ *Phone* _____

Address _____

2. *Full Name* _____ *Relationship* _____

Company _____ *Phone* _____

Address _____

3. *Full Name* _____ *Relationship* _____

Company _____ *Phone* _____

Address _____

4. *Full Name* _____ *Relationship* _____

Company _____ *Phone* _____

Address _____

5. *Full Name* _____ *Relationship* _____

Company _____ *Phone* _____

Address _____

Previous Employment

1. *Company* _____ Phone _____

Address _____ Supervisor _____

Responsibilities _____

From _____ To _____ Reason for Leaving _____

May we contact your previous employer? _____

2. *Company* _____ Phone _____

Address _____ Supervisor _____

Responsibilities _____

From _____ To _____ Reason for Leaving _____

May we contact your previous employer? _____

3. *Company* _____ Phone _____

Address _____ Supervisor _____

Responsibilities _____

From _____ To _____ Reason for Leaving _____

May we contact your previous employer? _____

Military Service

Branch _____ From _____ To _____

Rank at Discharge _____

Disclaimer and Signature

I certify that the statements I have made are true and correct to the best of my knowledge. I understand that the submission of any false information or the omission of any requested information in connection with my application for internship, whether on this document or not, may be cause for failure to consider or for immediate discharge should I become an intern at Rockland Peak Performance Inc.

Signature _____ Date _____



Applicant Information Release

I hereby authorize any person, education institution, or company I have listed as a reference on my internship application to disclose in good faith any information they may have regarding my qualifications and fitness for internship. I will hold Rockland Peak Performance Inc., any former employers, educational institutions, and any other persons giving references free of any liability for the exchange of this information and other reasonable and necessary information incident to the internship process.

Signature _____

Printed Name _____

Date _____

Comments: