

Internship Application

Thank you for your interest in our Internship Program. This program is designed for committed individuals interested in learning about dog behavior and reinforcement training. Our goal is to have the program be beneficial to both you and Unleash Yourself. This is an unpaid position.

Please complete application and attach your resume.

Name

Home Phone

Address

City

Zip

Email address

Work Phone

Why are you interested in this program? What are your goals?

Tell us about your dog experience.

Do you own a dog(s)? Yes No	Name(s); Breed; Age
Has your dog had training? Yes No	Where and what type?
Any dog sports/groups? Yes No	What type?
Are you currently working with your dog? Yes No	Where and what type of class or program?

Training dogs involves more than just being good with animals, you must be good with people as well. Tell us about any special skills, education or experience you have working with people. You will be training the people as well.

Class Observations

You must observe 3 complete sets of 8-week classes and submit observation forms each week. Class dates and times are listed on our web site. Please get OK from Gina prior to start date.

Class Name/Date	Observation forms completed? Yes No	Comments
Class Name/Date	Observation forms completed? Yes No	Comments
Class Name/Date	Observation forms completed? Yes No	Comments

Signed

Date
