



**KAPPA SIGMA**  
**ENDOWMENT FUND**  
*Investing In Our Future*  
*Since 1919*

**INTERNSHIP APPLICATION**

Name: \_\_\_\_\_  
Last
First
Middle

Email Address: \_\_\_\_\_ Phone # \_\_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_      Initiation Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Initiation Chapter: \_\_\_\_\_ College/University: \_\_\_\_\_

Major: \_\_\_\_\_ Cumulative GPA: \_\_\_\_\_ (on a 4.0 Scale)  
 Minor(s): \_\_\_\_\_ GPA: \_\_\_\_\_ (on a 5.0 Scale)  
 \_\_\_\_\_

Home Information:

Address: \_\_\_\_\_  
Street Number & Name
Apt#  
 \_\_\_\_\_  
City
State
Zip Code

School Information:

Address: \_\_\_\_\_  
Street Number & Name
Apt#  
 \_\_\_\_\_  
City
State
Zip Code

Which Semester/Term are you Applying for?  
 Spring 20\_\_\_\_ Summer 20\_\_\_\_ Fall 20\_\_\_\_

Are you a U.S. Citizen?      Yes      No

Are you a Canadian Citizen?      Yes      No

Are you in the U.S. Armed Forces?      Yes      No

If Yes, Please list any obligations that you have to the U.S. Armed Forces.

\_\_\_\_\_  
 \_\_\_\_\_

Have you been convicted of a Misdemeanor or a Felony?      Yes                      No  
\*Note\* An indication of Yes does not automatically remove your name from consideration.

If Yes, explain: \_\_\_\_\_  
\_\_\_\_\_

**Ritual Proficiency**

(Please indicated the levels of Ritual Proficiency that you have completed)

Grand Master of Ceremonies	Kappa Sigma Initiatory
Grand Master	Pledging Ceremony
Officer Installation	Master of the Ritual (All the Above)

**Chapter Leadership Positions**

(Please list all officer positions, committee chairs, etc. that you have held within your chapter)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Campus University Involvement & Leadership Positions**

(Please list all university (non-fraternity) activities that you have participated in and any leadership positions held)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Honors, Awards & Achievements**

(Please indicate any fraternity and non-fraternity honors, awards &/or achievements you have received.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Community Service & Philanthropic Involvement**

(Please list any community service or philanthropic causes you have been involved with, the duties performed and the number of hours for each)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Additional Knowledge or Skills**

(Please list any additional knowledge, skills or abilities you have that would benefit you in this position)

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**Expectations**

(Please list any expectation or knowledge you wish to gain from this internship position)

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- Please feel free to use additional paper to answer any questions you feel need further explanation or detail.
- Please submit a completed application form, an official transcript, an optional faxed transcript copy for immediate consideration and a resume by fax to 434/296-5733 , by email to KSEF@hq.kappasigma.org or by mail to:

Kappa Sigma Endowment Fund  
 c/o Internship Application  
 PO Box 5643  
 Charlottesville, VA 22905-5643

- Please have your recommendation letters faxed, emailed or mailed to the addresses above by the University Faculty/Administration Member and/or the Business/Community Leader.

**DEADLINES**

Term Applying For:	Deadline for Submission:
Summer 2009	May 1 <sup>st</sup> , 2009
Fall 2009	July 15 <sup>th</sup> , 2009
Spring 2010	December 8th, 2009

***ALL applications MUST be postmarked or received by the dates listed above.  
 Any applications received after the cut off dates WILL NOT be considered.***