



# Student Advisor Summer Internship Application

Your complete application should consist  
of the following materials:

1. SEEDS Summer Advisor Summer Internship Application
2. Current High School or College Transcript
3. Personal Statement (1-2 pages)
4. Résumé
5. Professional Reference Form

Please send the entire application as one (1) PDF file  
[saved as “lastname\_firstname-programapplyingto”]  
to email - [guidance@seedsaccess.org](mailto:guidance@seedsaccess.org).

**Application Deadline: May 15, 2023**

**You will be notified of decisions on a rolling basis until all positions are filled.**

It is the policy of SEEDS, Inc. to afford equal opportunity employment to qualified individuals regardless of their race, religion, color, national origin, age, sex, handicap, marital status, veteran status, sexual orientation, or any other classification protected by law, and to comply with all applicable laws and regulations relating to equal employment opportunity.

### YOUNG SCHOLARS PROGRAM:

The dates of the internship are July 3, 2023 through August 4, 2023. Student Advisors will work Monday – Friday from 8:30am – 2:30pm on-site. All Student Advisors must ride the SEEDS bus with Young Scholars to and from the site school (Far Brook School in Short Hills, NJ). *Preference given to those eligible from the Greater Newark area.* A stipend for your work will be paid at the end of the five-week session. Candidates must be an enrolled high school student and at least a rising junior.

### SCHOLARS PROGRAM:

The dates of the internship are June 22, 2023 through August 4, 2023 which includes The Summer Challenge Program and The Capstone Experience. Student Advisors will reside on campus for the entire duration of the internship. Room and board are included. All Student Advisors must be available to ride the SEEDS bus with the Scholars to and from the site school (*tentatively* The Masters School, Dobbs Ferry, NY). A stipend for your work will be paid at the end of each three-week session. Candidates must be an enrolled college student and at least a rising sophomore.

### COLLEGE SCHOLARS PROGRAM:

The dates of the internship are June 22, 2023 – July 14, 2023. Student Advisors will reside on the campus of the site school (Hobart & William Smith Colleges, Geneva, NY) for the entire duration of the internship. Room and board are included. All Student Advisors will receive transportation to the site school for training prior to student arrival and must chaperone the College Scholars on the SEEDS bus during the return trip home. A stipend for your work will be paid at the end of the three-week session.

I am interested in applying for the following summer program (check appropriate box):

Young Scholar Program (Must be an enrolled high school student and at least a Rising Junior)

Scholars Program (Must be an enrolled college student and at least a Rising Sophomore)

College Scholars Program (Must be an enrolled college student and at least a Rising Senior)

**Part I. Applicant's Information**

Name: \_\_\_\_\_  
(First) (Last)

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

E-mail: \_\_\_\_\_

Current Address: \_\_\_\_\_ Permanent (Home) Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone (Home): \_\_\_\_\_ Phone (Cell) \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
mo day year

Gender: \_\_\_\_\_

Ethnicity (optional): \_\_\_\_\_

Do you have a driver's license? (Circle one) Yes No

Do you have access to a car? (Circle one) Yes No

Which SEEDS program did you graduate from?

Class/YOG \_\_\_\_\_ Program \_\_\_\_\_

|   |
|---|
| High School: _____<br>(Name of school) (City, State, Zip Code)        |
| College/University: _____<br>(Name of school) (City, State, Zip Code) |

Current GPA: \_\_\_\_\_

*(Please include a copy of your transcript. Unofficial transcripts are acceptable.)*

**Part II. Experience and Skills**

- 1) Please provide the following information as it pertains to your involvement in extracurricular activities and sports at your high school or college/university below:

| <b>Extracurricular Activity/Sports/<br/>Special Honors</b><br><i>(ex: Resident Advisor, Dean's List)</i> | <b>Length of<br/>Involvement/Year<br/>Received</b><br><i>(ex: 3 months; Junior<br/>Year)</i> | <b>Leadership Position<br/>(If Any)</b><br><i>(ex: President, Captain)</i> |
|--|--|--|
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

- 2) Please provide the following information as it pertains to previous experience with delivering or facilitating a workshop, program or presentation below:

| Workshop/Program/<br>Presentation Title<br><i>(ex: Selecting a College Major)</i> | Your main responsibilities<br><i>(ex: PowerPoint creation;<br/>publicity)</i> | Target Audience and Size<br><i>(ex: 10 Teens, 50 Adults)</i> |
|---|---|--|
|   |   |  |
|   |   |  |
|   |   |  |
|   |   |  |
|   |   |  |

- 3) One of the major responsibilities of all Student Advisors is teaching a non-academic extracurricular class (e.g. drama, dance, Japanese, etc.). Please specify any extracurricular skills and related teaching experience if any:

| Skills<br><i>(ex: Piano, Arabic, Squash, Chess)</i> | Any Previous Experience in Teaching<br><i>(ex: afterschool tutor, coach)</i> |
|---|--|
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |

**Part IV. Personal Statement**

Please include with this application a typed personal statement addressing the following:

*In your statement, define what it means to be a part of SEEDS. (What does it mean to you personally to be a SEEDS alumnus/a? What does the organization mean to you and your family?) Be sure to include details of your SEEDS story, your experiences/lessons at your placement school, and what specific or unique impact you will contribute as a Student Advisor to the current cohort of students.*

(Please note: Your personal statement should include your name in the header and not exceed more than two pages in length)

**Part V. Résumé**

Please enclose your most recent résumé. Include volunteer/project/job responsibilities, as well as, dates of work.

**Part VI. Letter of Reference**

Please give the form on the next page with an envelope to a teacher, professor, advisor, counselor or employer with whom you have worked and who is able to speak on your behalf. This reference is confidential and will only be used for the purpose of considering your SEEDS internship application. Complete the information at the top of the form and please ask your reference to mail his/her letter directly to SEEDS in an envelope signed with his/her name across the seal of the envelope. We must receive this letter by the application deadline.

# Student Advisor Summer Internship Reference Form



## Student Advisor Summer Internship Reference Form

Please complete all parts of this form and send it to:

**SEEDS – Access Changes Everything**

**Attn: Programs & Guidance**

**494 Broad Street, Suite 105**

**Newark, NJ 07102**

**[guidance@seedsaccess.org](mailto:guidance@seedsaccess.org)**

**Applicant:** Please fill in your personal information below. Ask a teacher, professor, advisor, counselor or employer to submit the completed form to SEEDS – Access Changes Everything.

Name: \_\_\_\_\_ Gender: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Present School: \_\_\_\_\_ Grade: \_\_\_\_\_

---

The above-named student is applying for a SEEDS Summer Internship. SEEDS – Access Changes Everything is a non-profit organization serving academically talented, highly motivated youth from low-income communities. Our Student Advisors work closely with students during their summer academic enrichment program. A Student Advisor’s job is to provide academic and personal support individually and to the entire cohort. Your candid evaluation of this applicant’s leadership skills and personal qualities is greatly appreciated. All comments are confidential and will only be reviewed during the application process.

Please return this form; no later than **May 15, 2023**. **The applicant will not be considered for the position until we have received this form.**

SEEDS appreciates your time and insight.

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

Title/Position: \_\_\_\_\_

Organization/Company: \_\_\_\_\_

Telephone: \_\_\_\_\_

Signature: \_\_\_\_\_



Please answer the following questions, using this form or attaching a separate sheet of paper.

1. How long have you known the applicant and in what context?

---

---

---

---

2. How would you describe this applicant's strengths?

---

---

---

---

---

3. Please comment on the applicant's character and leadership skills.

---

---

---

---

---

4. Please share, in your opinion, any area in which the applicant can improve.

---

---

---

---

---

5. Do you have any reservations about this applicant's abilities to act as a SEEDS Student Advisor and work with our student population?

---

---

---

---

---

---

---