

Application Process

Please include all of the following items in your completed packet. A complete application will include the following in one (1) package/envelope or one (1) scanned e-mail. Packets that arrive piecemeal will reflect poorly on your acceptance:

	Completed and signed application form				
	Unofficial School Transcripts				
	Up to 5 examples of artwork, your portfolio or an audio/video recording of a performance if you are in the Dept.				
	of Fine Arts, or if they are available to you.				
	Completed Self-evaluation. The three reference evaluations may arrive per your reference's sending.				
	1-2 page essay explaining your thoughts on Creative Arts in Healthcare; regarding the goals you have for this internship and the connection this internship poses to your career after university.				
	Professional resume.				
Program	n Acceptance				
unoffici student require adminis same st	ints will have the opportunity to tour the program and ask any questions they have prior to acceptance. Upon all acceptance of the internship and depending on the student's choice of seeking credit for the internship, is will work with Sanford's Academic Affairs or Volunteer Services to complete Sanford mandated onboarding ments. They will work together to complete an agreed upon set of goals and expectations. All necessary strative agreements must be completed before the student may begin said internship. Interns will be held to the randards and policies as employees of Sanford Health with regard to confidentiality, HIPPA, immunizations, and mental policies and procedures.				
Submis	sion of Application				
underst	that all information provided in this application is complete and correct to the best of my knowledge. I and that any false statements on this application shall be sufficient cause for rejection of my application for this program, or immediate discharge from the program once discovered.				
informa perform exonera	I, the undersigned applicant, do, hereby authorize my former supervisors and above named references to release any and all information pertinent to this application process, including but not limited to, my qualifications and experience, quality of performance, and professional and personal conduct. I hereby extend absolute immunity to, release from all liability, discharge, exonerate, and agree not to sue Sanford Health, Sanford Arts, and/or their employees, agents, or representatives, for any action that results from the release of information by such supervisors and references as identified above.				
Applica	nt's signature Date				
All com	pleted applications must be sent in prior to the deadline noted on Page 1 of this application. It is the sole				

Please return completed application and materials to:

Jessie Park or scan and e-mail to <u>Jessie.Park@SanfordHealth.org</u> 1305 W. 18th St Route # 6881 Sioux Falls, SD 57104

responsibility of the applicant to ensure the completed application has been received.

Please direct any questions to 605.328.6071 or Jessie.Park@SanfordHealth.org



Sanford Arts Internship Application.

Please type or print clearly.

Seeking an internship for the		Application Deadline:
selected term(s):		
	Fall 2021	July 2021
	Spring 2022	December 2021
	Summer 2022	May 2022
	Fall 2022	July 2022

Please contact Jessie Park at Jessie.Park@SanfordHealth.org or call 605.328.6071 for more information. Name: Phone (Cell): Phone (Other): Address: State: City: Zip: **Email Address: Academic Background** University/College: Dates Attended (MM-YY) From: To: Major(s): Minor/Area of Emphasis: Graduation date (anticipated):

Applicable Coursework

Courses listed are not limited to the following: Fine Art, Psychology, English, Theater, Music Education/ Performance, Dance performance, Child Development, Art Therapy and Expressive Therapies.

Course Title		Grade Earned
1.		
2.		
3.		
4.		
5.		
6.		
7.		

Employment History	
Please list relevant current or previous er	mployment including, but not limited to the following: Positions
relating to the Arts, Human Services, Hed	alth Care setting, etc.:
Place; Position; Supervisor	Dates worked
1.	
2.	
3.	
Professional, School and Commun	nity Involvement
	ences you are currently or recently have been involved in:
zist organizations and leadership expense	shoes you are carrenally or recently have been involved in
References	
	ence in sealed and signed envelopes, including at least one from a
professor. Family members or spouse sh	ould not be used for letters of recommendation.
_	
Reference #1:	
Phone Number:	
Reference #2:	
Phone Number:	
Reference #3:	
Phone Number:	
Others (please list name and phone num	nber):

Essay

Please explain your thoughts, as they pertain to this internship, in Arts and Healthcare; how you would like to put those thoughts into action while at Sanford Arts and what your current aspirations are pertaining to a possible career in the Arts and/ or Arts and Healthcare.

Prompts to possibly include in your essay:

- Major Accomplishments within your emphasis or in a health care setting
- Examples of your flexibility in the workplace
- Creativity (both within the arts and other contexts)
- Ability to adapt in a constantly changing environment
- Willingness to work with others
- Leadership experiences
- Any other information you feel is important in order for us to get the best snapshot of you!
- Self-starting behaviors/initiative

Faculty Advisor Support

Faculty Advisor:	Department:	
To be completed by the Faculty Ad	visor in addition to evaluation form (attached):	
I support	's interest in and application to the Sanford Arts internsl	nip program.
·	ic credit for this internship program. ue academic credit and will instead apply for this opportun	ity as a voluntee
I can be contacted at (phone) reference regarding this application	or by emailn.	as a
Additional Comments:		
Signature:		