



LA Sparks
Courtney's Corner
Sports Medicine Internship Application

Name

Year in school

Local Address

Phone

Permanent Address

Phone

Gender

Academic Major

Birth date

Intended Graduation Date (include semester)

GPA

Do you possess current cards for CPR/First Aid?

E-mail

Have you completed any of the following academic classes?

Human Anatomy

Human Physiology

Kinesiology

Introduction to Sports Medicine

Nutritional Science

Motor Control

Biomechanics

Physiology of Exercise

How did you become aware of the Internship program?

What are your career goals and aspirations?

What personal characteristics do you possess that would make you an asset to our program?

Do you have any previous work or volunteer experience in the health care professions?

Are you involved in any other Activities or do you hold a job during the summer months?

LETTERS OF RECOMMENDATION:

Please provide the names and phone numbers of the two individuals who will be writing letters of recommendation in support of your application to this program.

(These letters are due by the due date for this application)

Name: _____ Relation/Position: _____

Name: _____ Relation/Position: _____

Application FEE: \$20

Please Make Checks/ Money orders Payable to: LA Sparks

Mail Completed Application, Letter of recommendations, and payment to
La Sparks Attn: Courtney's Corner Internship
865 S. Figueroa St. Suite 104
Los Angeles, CA 90017

Application will include One Ticket to SIT IN THE COURTEY'S CORNER SECTION AT THE LA SPARKS SEASON OPENER VS . MINNESOTA LYNX ON JUNE 7, 2011 AT 8PM.

FOR ADDITIONAL TICKETS, PLEASE call **877.44.SPARKS**