Please bring or mail your application to the PHAR office by noon on Monday July 1

Application for PHAR Internship Program

| (Please write clearly) | |
|---|---|
| Name | |
| Address | Contact Phone # |
| 1. Please list any previous leadership experiences. | |
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| | |
| 2. What are some things you have done to contribute | e to your community? |
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| | |
| 3. List any experiences and/or skills you have that w | ould make you a good candidate for this internship. |
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| | |
| | |
| | |
| Your signature | Date |
| Deliver to: | |
| PHAR | |

PHAR
Public Housing Association of Residents
1000 Preston Avenue, Suite C
Charlottesville, Virginia 22903

Someone will call the phone number you have listed by July 1 to schedule an appointment. Thank you for your interest in joining the Internship Program and PHAR's work to improve public housing neighborhoods.