

KSAR 2025 Summer Intern Program

Note: This is an alternate PDF form of the Microsoft Word document. Use it if you do not have access to Word. Please add your information, print out the document, sign, then scan and return.

Students interested in a summer internship with KSAR should fill out the following information and return to John Dietrich at john@ksar15.org with **Summer Intern** in the subject line.

I will be selecting 4 or 5 students to participate as non-paid summer KSAR interns. I will be selecting students who have a strong desire to expand their knowledge of media and can help KSAR achieve our goals to serve the community of Saratoga.

The program will start on June 9th and run through July 24th. We will meet 4 days each week (Mon-Thur) between 10 am and 2:30 pm with 30 minutes for lunch. This is a period of 7 weeks.

I am asking for a commitment of 5 of the 7 weeks for your participation in the program. Note days you will not be able to attend on the next page.

We will work on KSAR projects to shoot and edit video. We will also likely do some fun projects like how to recreate commercials seen on TV and do some PSAs.

Please treat this like a summer job. The internship is a non-paid position. I expect you to make a commitment to the program and follow through in a timely way on assignments.

Priority will be given to those who are 16 and older.

Please describe why you want to be a KSAR intern:

Answer here

What are typical video resolutions:

Answer here

Name: Age: Phone: Email: Address	‡ Parent Information Name: Phone: ‡ I will consider this parent as an emergency contact
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Describe your skills:

Answer here

(Note that None is an OK answer to any of the questions)

What computer do you use: Apple Windows Other

What spreadsheet SW do you use:

What word processing SW do you use:

What video editing SW do you use:

What audio editing SW do you use:

Do you have a video camera:

 If so, what type:

Do you drive?

Can you drive others?

Please list dates you cannot attend the sessions

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I need to have you and your parents (if you are under 18) sign below.

I accept the terms of this internship.

Print student's name:

Student's signature: _____ Date _____

Print parent's name:

Parent's signature: _____ Date _____