

Identification No:  
(Office use only)





## APPLICATION FOR ICON INTERNSHIP 2010

**Restrict your application to this form only and refer to the guidance on the website.  
Your application may be disqualified if you attach or embed CVs, testimonials and other material.**

### Section 1: Name of Internship

EFP Internship reference number:		Title of Internship:	
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### Section 2: Your Details

Title		Address 	
First names		Postcode	
Surname		Telephone 	
Email address 		Mobile 	

Where <b>first</b> did you see/hear about this internship?	
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### Section 3: Education and Training

**Formal education:** include qualifications achieved and those you are currently studying for.

School/College/University	Name of Qualification	Date awarded

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**Training:** include additional training relevant to your application – e.g. work-based or short courses.

Training organisation	Course title and subjects studied	Course dates

**Membership of relevant Professional Bodies:**

Name of body	Membership Status

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**Other relevant work or evidence from hobbies:** include any voluntary work or related pastimes that demonstrate your practical abilities in particular

Work undertaken	Dates

#### Section 4: Employment

Current/most recent employer	
Dates employed	
Job title	
Main responsibilities in post	

**Previous employers:** please list all previous employers starting with the most recent.

Employer	Position	Dates Employed


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Section 5: Write a **200-300** word statement – why are you interested in *this* Internship?


A large, empty rectangular box with a black border, intended for the student to write their 200-300 word statement.

## Section 6: Referees

Please provide names and e-addresses of two professional (not personal) referees familiar with your practical work where possible. Unless you request otherwise, we will pursue references after shortlisting and before interview:

1. Name	
Organisation	
Relationship to you	
Email address 	

**Referees are contacted by e-mail only. Do not provide telephone numbers as an alternative.**

2. Name	
Organisation	
Relationship to you	
Email address 	

**Section 7: Equality Monitoring Form**

We would be grateful if you would complete this equality monitoring form. Completion is not compulsory, though ICON (Institute of Conservation) and your internship funder would be grateful for your assistance. One of the key aims of the Icon Scheme is to attract people who are under-represented in the heritage sector. This will be achieved by encouraging applications from a wider section of the community. The monitoring information will be used purely to help Icon and its partners see how well the scheme is doing in this respect.

1. What is your gender?  Male  Female

2. If you **are not a British Citizen**, please indicate your nationality and go direct to Section 4

3. If you **are** a British Citizen, choose **ONE** section from A to E, to indicate your ethnic group and tick whichever boxes are relevant within that section:

<p><b>A. White</b></p> <p><input type="checkbox"/> British</p> <p><input type="checkbox"/> English</p> <p><input type="checkbox"/> Scottish</p> <p><input type="checkbox"/> Welsh</p> <p><input type="checkbox"/> Irish</p> <p><input type="checkbox"/> Any other white background Please write below:</p>	<p><b>B. Mixed</b></p> <p><input type="checkbox"/> White and Black Caribbean</p> <p><input type="checkbox"/> White and Black African</p> <p><input type="checkbox"/> White and Asian</p> <p><input type="checkbox"/> Any other Mixed background Please write below:</p>	<p><b>C. Asian, Asian British, Asian English, Asian Scottish or Asian Welsh.</b></p> <p><input type="checkbox"/> Indian</p> <p><input type="checkbox"/> Pakistani</p> <p><input type="checkbox"/> Bangladeshi</p> <p><input type="checkbox"/> Any other Asian background Please write below:</p>
<p><b>D. Black, Black British, Black English, Black Scottish or Black Welsh</b></p> <p><input type="checkbox"/> Caribbean</p> <p><input type="checkbox"/> African</p> <p><input type="checkbox"/> Any other Black background Please write below:</p>	<p><b>E. Chinese, Chinese British, Chinese English, Chinese Scottish, Chinese Welsh or other ethnic group</b></p> <p><input type="checkbox"/> Chinese</p> <p><input type="checkbox"/> Any other ethnic background Please write below:</p>	

4. Do you regard yourself as having a disability?  Yes  No

If your answer is 'Yes' please give details?

Please return your completed application form to the details below, by **7 JUNE 2010**.

**Email:** [training@icon.org.uk](mailto:training@icon.org.uk) (please put the internship reference number in the subject line)

**Address:** EFP Internship Application Ref No: Icon, The Glasite Meeting House, 33 Barony Street, Edinburgh, EH3 6NX