Albany County Summer Employment Program
Questionnaire

Please complete the questionnaire below. We cannot guarantee that all requests can be accommodated, however this will help us better place you for summer employment.

Full Name (print clearly): _____

1. Is there a particular field or Department you would most **enjoy** working in? (Please check all that apply)

Social Services	☐	Health	☐	Legal	☐	Mental Health	☐
Law Enforcement	☐	General Services	☐	Probation Dept.	☐	County Clerk	☐
Financial	☐	Sewer District	☐	No Preference	☐		
Other (please name)	☐	_____					

2. What setting would you prefer working in?

   Office ☐ Outdoors ☐

3. What is your ideal summer placement/job?

   _____

   _____

4. You may be placed at a work site that is not located in downtown Albany. Please explain if you will be able to commute to another location on your own. Please check all that apply.

   I will be taking the bus to work ☐
   I will be walking to work ☐
   I will have access to a car ☐
   I will be carpooling with someone else going to a specific office in downtown Albany ☐

5. Is there a particular field you would extremely dislike working in?

   _____

6. Do you have any educational or work experience in your preferred field(s)?

   _____

   _____

   _____

7. Please provide a brief description of your ideas and expectations for the internship.

   _____

   _____

   _____

Please complete and submit the questionnaire and application to:

Albany County Legislature
Attn.: Necole M. Chambers, First Deputy Clerk
112 State Street, Room 710
Albany, NY 12207