

Please complete this form and submit it with each application. Signature is required.

New York City Ballet maintains a policy of equal opportunity for all employees and applicants for employment without regard to race, color, creed, religion, national origin, gender, age, disability, pregnancy, marital status, veteran status, sexual orientation, genetic predisposition or carrier status, citizenship, or any other characteristic protected by law in all employment decisions. Equal access to programs, services, and employment is available to all persons, subject to legal requirements. Those applicants requiring reasonable accommodations to the application and/or interview process should notify Human Resources.

APPLICANT INFORMATION

1. Name:
2. Current occupation:
If you are a student, please fill out the following information:
 - a. Name of college / university:
 - b. Academic major:
 - c. Academic level: Freshman Sophomore Junior Senior Graduate program
 - d. Expected graduation date:
 - e. Will you be receiving academic credit for this internship? Yes No
3. Email:
4. Phone number:
5. Address:
6. Internship position you are applying for:
 - a. If you are applying for more than one internship position with NYCB, please list the other position(s) you are applying for:
7. Internship period: Summer Fall Spring
 - a. Available dates for internship: _____ to _____
8. If you have previously worked for / interned with NYCB, please list those position(s):
9. How did you hear about this internship?

EMPLOYMENT ELIGIBILITY

10. Are you legally authorized to work in the United States? Yes No
11. Will you now, or in the future, require sponsorship for employment visa status (e.g., H-1B visa)? Yes No

SELF IDENTIFICATION (optional) – in order to track the effectiveness of our recruiting efforts and ensure we consider the needs of all of our employees, please consider the following optional questions; this data will not be shared with those responsible for hiring decisions:

12. Sex: Female Male
13. Gender identity: Female Male Non-binary Transgender
 Prefer to self-describe _____ Prefer not to say
14. Race / ethnicity: American Indian or Alaskan Native Asian, Asian American, or Pacific Islander
 Black or African American Hispanic or Latino
 White Prefer to self-describe _____
 Prefer not to say

CERTIFICATION STATEMENT

I certify that the statements made by me in answer to the foregoing questions are true, complete, and correct to the best of my knowledge and belief.

Signature

Date

(If filling out this form on a computer, typing your name in the 'Signature' field constitutes a legal signature confirming that you acknowledge and agree to the above.)