



NEW YORK STATE BRIDGE AUTHORITY

*Thank you for your interest in an internship with the New York State Bridge Authority.
Please fill out the questionnaire below, and return it with your application.*

NAME: _____

Address: _____

Phone Number: _____

Please indicate at which bridge you would like to work:

RVWB KRB MHB NBB BMB

1. You understand this is an **outside job** w/ the Maintenance Department? _____

2. Do you have a driver's license? (If No, Transportation?) _____

3. Do you have any construction related experience? _____

4. Do you have any experience operating small equipment? _____

If yes, what type? _____

5. Do you have any other skills that are positive to the job? _____

6. Are you interested in working as a toll collector, if needed? (If needed) _____

7. Are you interested in working in the office, if needed? _____

8. What college do you attend? _____

9. Are you enrolled full time? _____

10. What is your major in school? _____

11. What college year will you be in during the fall semester? _____

12. When did you graduate High School? _____

13. Have you ever worked for the Bridge Authority before? _____

14. Have you ever held a supervisory position? _____

If yes, please explain: _____

15. If you are applying for an internship in maintenance, please indicate which 10 week internship you are interested in. (please circle one)

May 23rd to August 12th June 27th to August 19th

If you we are unable to accommodate your choice, would you be interested in the other session? _____

16. Have you ever been terminated from a job? _____

If yes, please explain: _____