





Please list your hobbies and/or interests OUTSIDE of school/work: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please list/describe any outdoor activities that you participated in during the last year that relates to hunting, fishing, and/or gathering: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are you certified in CPR/First Aid? \_\_\_\_\_ YES \_\_\_\_\_ NO

If yes, please list which program(s) and expiration date: \_\_\_\_\_

\_\_\_\_\_

Please describe any training or experience you have in safely operating and/or using equipment including, but not limited to firearms, other weapons, emergency vehicles, ATVs, boats, snowmobiles, GPS, compass, maps, and radios. Please be sure to list any safety certifications that may apply to your training related to this question also (i.e., Hunter Safety, etc.). \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please describe your time management skills. Give an example in which you had to manage a number of tasks at one time. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please describe your experience and/or ability to effectively communicate with a diverse group of people. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please describe your participation in any events or activities in your community. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Define GLIFWC and its responsibilities with regard to Treaty rights and issues.** (Do NOT copy and paste from the GLIFWC website! Write this definition in your own words.) \_\_\_\_\_

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**In your own words, what are Ceded Territories?** \_\_\_\_\_

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**Which Tribes are members of GLIFWC?** \_\_\_\_\_

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**State any additional information that you feel may be helpful to us in considering your application for the GLIFWC Summer Internship Program or letters of reference from professors/advisors. (Attach additional pages if necessary.)** \_\_\_\_\_

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**Please list three references that are not related to you that we may contact. One should be your academic advisor, one should be a teacher/professor, and the third a past/current employer or supervisor.**

Academic Advisor Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Teacher/Professor Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Past Employer/Supervisor Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

- **I certify that the answers given herein are true and complete to the best of my knowledge.**
- **I authorize investigation of all statements contained in this application for employment as may be necessary at an employment decision. I understand that this application is not nor intended to be a contract of employment.**
- **In the event of employment, I understand that false or misleading information given on my application or interview may result in discharge from the internship program. I also understand that I am to abide by the Personnel Policies and Procedures of the Great Lakes Indian Fish and Wildlife Commission.**

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**Signature**

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**Date**

Send ALL required paperwork as outlined in the Summer Internship Announcement with this application to:

Pauline (PJ) Lemieux, Internship Program Coordinator  
Great Lakes Indian Fish and Wildlife Commission  
P.O. Box 9  
Odanah, WI 54861-0009

**OR** email to: [plemieux@glifwc.org](mailto:plemieux@glifwc.org)  
Subject: **2023 GLIFWC Internship Program Application**

Questions regarding the internship announcement or requirements can be directed to Pauline Lemieux via email or phone: (715) 682-6619 ext. 2138

Closing date for receipt of completed application is:  
**JANUARY 13, 2023, at 4:30 PM (CST)**