

# GREAT LAKES INDIAN FISH & WILDLIFE COMMISSION

P.O. Box 9 • Odanah, WI 54861 • 715-682-6619 • FAX 715-682-9294

[www.glifwc.org](http://www.glifwc.org)



## • MEMBER TRIBES •

### MICHIGAN

Bay Mills Community  
Keweenaw Bay Community  
Lac Vieux Desert Band

### WISCONSIN

Bad River Band  
Lac Courte Oreilles Band  
Lac du Flambeau Band

Red Cliff Band  
St. Croix Chippewa  
Sokaogon Chippewa

### MINNESOTA

Fond du Lac Band  
Mille Lacs Band

## INTERNSHIP ANNOUNCEMENT

### POSITION:

Inland Fisheries Intern (2-4)

### CONDITIONS OF EMPLOYMENT:

June 2, 2025 to August 8, 2025

(10 weeks/400 hours total) Rate of pay: \$15.00 per hour

\*Dates may change at discretion of supervisor and/or intern availability\*

### SUPERVISION:

Primary — Aaron Shultz

Other staff includes Mark Luehring, Adam Ray,  
Mac McPherson, and Caren Ackley

### DUTIES AND RESPONSIBILITIES:

1. Hooking mortality study.
2. Conduct in-lake and watershed habitat surveys.
3. Draft summary reports of habitat surveys.
4. Assist with ashigan (largemouth bass) population estimates.
5. Assist with fish community surveys.
6. Assist with multi-being/species telemetry project in Mille Lacs.
7. Field work is expected to include a telemetry project on fishes in Mille Lacs, data collection, and habitat surveys for lakes and watersheds that are in need of rehabilitation.
8. Contaminant sampling and stream surveys.
9. Write a story for the Mazina'igan (talking papers).
10. Other duties as assigned.

### QUALIFICATIONS:

- An interest in fisheries management and research.
- Experience with data collection and entry.
- An ability to work long hours in adverse conditions.
- Experience with R Statistical Software, Excel, and PowerPoint preferred (not required).
- Formal fisheries courses preferred (not required).
- Valid driver's license and ability to be insurable under GLIFWC's motor vehicle policy required.
- Native American preference, but all qualified applicants will be considered.

**Send all required paperwork as outlined in the 2025 Summer Internship Openings announcement to:**

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

**OR** email to: [plemieux@glifwc.org](mailto:plemieux@glifwc.org)

**Subject: 2025 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 application: January 31, 2025 at 4:30 PM (CST)**

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## SUMMER INTERNSHIP PROGRAM APPLICATION FOR EMPLOYMENT

FEDERAL LAW REQUIRES THAT ALL APPLICATIONS BE CONSIDERED WITHOUT REGARD TO RACE, RELIGION, COLOR, SEX, OR NATIONAL ORIGIN. THE GREAT LAKES INDIAN FISH AND WILDLIFE COMMISSION IS AN EQUAL OPPORTUNITY EMPLOYER, SUBJECT TO THE PROVISIONS OF P.L. 93-638/INDIAN PREFERENCE ACT.

DATE OF BIRTH: \_\_\_\_\_

DATE OF APPLICATION: \_\_\_\_\_

INTERSHIP(S) APPLIED FOR: \_\_\_\_\_

REFERRAL SOURCE:   \_\_\_ JOB ANNOUNCEMENT   \_\_\_ FRIEND   \_\_\_ RELATIVE  
                          \_\_\_ HANDSHAKE            \_\_\_ WEBSITE        \_\_\_ OTHER

NAME \_\_\_\_\_  
                                (LAST)                                  (FIRST)                                  (MIDDLE)

ADDRESS \_\_\_\_\_  
\_\_\_\_\_

TELEPHONE \_\_\_\_\_ Email Address \_\_\_\_\_

Are you a member of federally recognized tribe?           \_\_\_ YES           \_\_\_ NO

Name of Tribe \_\_\_\_\_

If not a member of federally recognized tribe, are you a descendant?           \_\_\_ YES           \_\_\_ NO

Which tribe? \_\_\_\_\_

Have you had a summer internship here before?           \_\_\_ YES           \_\_\_ NO

If yes, when? \_\_\_\_\_

Have you applied for a summer internship with GLIFWC in the past?           \_\_\_ YES           \_\_\_ NO

If yes, give date(s) \_\_\_\_\_

Are you a current college student?           \_\_\_ YES           \_\_\_ NO

What year are you in college?   \_\_\_ 1   \_\_\_ 2   \_\_\_ 3   \_\_\_ 4   \_\_\_ Graduating

Anticipated College Graduation Date? Month \_\_\_\_\_ Year \_\_\_\_\_

If not in college yet, have you been accepted for the Fall 2025 Semester?           \_\_\_ YES           \_\_\_ NO

What college do you attend/will you be attending? \_\_\_\_\_

**\*You will need to provide current transcript or letter of acceptance\***

What is your major/minor (or intended major/minor for first year college students/high school graduates)?

Please list any organizations you are or have been involved in while in school/college: \_\_\_\_\_

**Are you able to relocate for the summer and travel as needed?**  YES  NO

If not, please explain: \_\_\_\_\_

**Will you need housing for the summer?**  YES  NO

\*Internships will be located on the Bad River Reservation in Odanah, Wisconsin\*

**What is the earliest date you will be available if chosen for an internship?** \_\_\_\_\_

**What is the last day you will be able to work?** \_\_\_\_\_

**Are you willing and able to work flexible hours/weekends if needed?**  YES  NO

**Do you have a valid drivers license?**  YES  NO

Drivers license number \_\_\_\_\_ State issued \_\_\_\_\_

Liability insurance?  YES  NO Access to a vehicle?  YES  NO

**Have you ever been convicted of a felony?**  YES  NO

If yes, please explain: \_\_\_\_\_

**Are you prevented from lawfully becoming employed in this country because of Visa or Immigration status?**  YES  NO

**Do you have any physical, mental, or medical impairment or disability that would limit your job performance in the position for which you are applying?**  YES  NO

If yes, please explain: \_\_\_\_\_

Do you have any allergies that we should be aware of?  YES  NO

Are these allergies life threatening?  YES  NO

Do you take medication for the allergies?  YES  NO

Please list the medication(s) taken (i.e., EpiPen, etc.)

**Please list any skills, training, and/or experience that pertain to the internship(s) you are applying for:**

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

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

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**Are you certified in CPR/First Aid?**

\_\_\_\_ YES

\_\_\_\_ NO

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

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**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.). \_\_\_\_\_

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

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

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

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**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 in 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.**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**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: **2025 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 and required materials is:  
**JANUARY 31, 2025, at 4:30 PM (CST)**