



DAVID VAUGHAN INVESTMENTS

## 2022 Summer Internship Application

David Vaughan Investments, LLC is an equal opportunity employer

Please download or print and complete the form and submit by one of the following:

**UPLOAD:** via dviinc.com  
Links can be found on the Open Opportunities page

**MAIL:** Attn: Beth Salmon  
5823 N. Forest Park Drive  
Peoria, IL 61614-3500

**FAX:** Attn: Beth Salmon  
309-681-4106

**EMAIL: Beth Salmon;**  
bsalmon@dviinc.com  
Scan form, attach and send

NAME* (Last name, First name, Middle name)			
HOME ADDRESS*	CITY*	STATE*	ZIP*
CAMPUS ADDRESS	CITY	STATE	ZIP
EMAIL*	TELEPHONE*	PREFERRED ADDRESS Home                      Campus	
DATE AVAILABLE TO WORK*	APPLICATION DATE*		

### EDUCATION / TRAINING

NUMBER OF YEARS COMPLETED			
HIGH SCHOOL NAME		LOCATION	
DEGREE / DIPLOMA		STUDIES	
COLLEGE / UNIVERSITY NAME		LOCATION	
CURRENT ACADEMIC STATUS Sophomore      Junior      Senior      Graduate			MAJOR / STUDIES
EXPECTED GRADUATION DATE (MM / YY)		CURRENT GPA	
ADVISOR'S NAME	ADVISOR'S TELEPHONE	ADVISOR'S EMAIL	

Specialized Training / Certifications, Apprenticeship, Classes, Organizations, Extracurricular Activities, Leadership Positions, Charities, etc.

Special Job-Related Skills and Qualifications from Employment or Other Experience

Professional, Trade, Business or Civic Organizations / Offices  
*You may exclude organizations that indicate race, color, religion, national origin, disability, age, sexual orientation, marital status, or other protected status.*

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<b>EMPLOYMENT</b>			
Employment history beginning with current or last job. Include military service assignments. If you include volunteer activities, you may exclude organizations that indicate race, color, religion, national origin, disability, or other protected status.			
EMPLOYER 1	CITY / STATE	FROM (MM / YY)	TO (MM / YY)
JOB TITLE		CURRENT / FINAL SALARY	
JOB RESPONSIBILITIES			
SUPERVISOR	SUPERVISOR TELEPHONE	SUPERVISOR EMAIL	
REASON FOR LEAVING			
EMPLOYER 2	CITY / STATE	FROM (MM / YY)	TO (MM / YY)
JOB TITLE		CURRENT / FINAL SALARY	
JOB RESPONSIBILITIES			
SUPERVISOR	SUPERVISOR TELEPHONE	SUPERVISOR EMAIL	
REASON FOR LEAVING			
EMPLOYER 3	CITY / STATE	FROM (MM / YY)	TO (MM / YY)
JOB TITLE		CURRENT / FINAL SALARY	
JOB RESPONSIBILITIES			
SUPERVISOR	SUPERVISOR TELEPHONE	SUPERVISOR EMAIL	
REASON FOR LEAVING			

<b>MILITARY</b>	
DESCRIPTION	STATUS
LOCATION	DATES SERVED
JOB-RELATED TRAINING	

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PERSONAL	
YES	NO
If under 18 years of age, can you provide proof of eligibility to work?	
Have you ever applied to us before? If yes, when?	
Have you ever been employed with us before? If yes, when?	
Do you have a relative or friend employed with us? If yes, who?	
Can you provide proof of citizenship, visa, and / or alien registration number after being hired?	
If required, are you available for travel?	
Will you require housing in the Peoria area?	
May we contact your present employer?	
How did you hear about this Internship?	

References Other than Previous Employers or Relatives	
FULL NAME 1	RELATIONSHIP
TELEPHONE	EMAIL
FULL NAME 2	RELATIONSHIP
TELEPHONE	EMAIL
FULL NAME 3	RELATIONSHIP
TELEPHONE	EMAIL

APPLICANT'S ACKNOWLEDGEMENT	
<p>I certify that answers given in this application are true and complete to the best of my knowledge. I authorize investigation into all statements I have made on this application as may be necessary for reaching an employment decision.</p> <p>I understand that if I become a finalist for a position, I may be asked to allow for further references including an intensive background check. I also understand I am required to abide by all rules and regulations of David Vaughan Investments and any special agreements reached between David Vaughan Investments, LLC and me.</p> <p>Nothing on the application is intended to create or imply a contractual relationship. I understand that employment is at will, i.e., that it is not for any specific time period or duration, and can be terminated with or without reason at any time.</p> <p>While employment policies or procedures may change from time to time, only a written agreement signed by the company's president can change my at-will status.</p> <p>I confirm that all information contained in this application is accurate to the best of my knowledge.</p>	
SIGNATURE:	DATE: