

For Office Use Only Date Received Received By Total Pages

Facility Profile

Name of Facility						
Address						
City			State/Zip			
Name of PGA Supervisor			PGA Classification			
Facility Type (Check one)		Private	Semi-Private	Pul	blic	
Resort	Daily Fee	Mu	nicipal	Other		
Number of Holes at Facility Annual			ounds Played			
Internship Work	Period Desir	ed (Check Peri	ods that Apply))		
Summer		Summer/Fall		Spring/Summer		
Other (Please Spe	ecify)					
	<i>J</i> ,					
			ip Responsibilit			
Golf Shop		tarter	me spent in each area Driving Range Other (Please list)			
Teaching		ag Room	Course A	0		
Club Repair		olf Carts	Tourname	ents		
Other Responsibil	lities Include					
			ship Responsib			
CalfShan		Percentage (%) of time spent in each area Starter Driving Range Other (Please list)				
Golf Shop			Driving F	0	Other (Please list)	
Teaching Club Repair		ag Room olf Carts	Course A			
			Tourname	ents		
Other Responsibil	lities Include					
	Spring	/Summer Inter	rnship Responsi	bilities		
	Perce	ntage (%) of ti	me spent in eacl	h area		

Golf Shop Teaching Club Repair rcentage (%) o Starter Bag Room Golf Carts

spent in each area Driving Range Course Advisor Tournaments

Other (Please list)

Other Responsibilities Include





Tournaments

	Tournaments						
What types of weekly or annual to (Select all that apply.)	ournaments are held at you	ur facility?					
Women's League/Day	Men's League/Day	Amateur Tour Events					
Junior League/Day	Member Events	Couples Events					
Professional Tour Events	Outings	Other (List)					
Other							
	Compensation						
Rate of Pay \$ /hour	OR \$	Salary /week					
Hours Worked Per Week (40 hours per week required)							
Are there other forms of compensation from the facility? Yes No							
If yes, please select all additional forms of compensation that apply							
Teaching	Club Repar	Merchandise Sales					
Tournaments	Gratuity	Other (list)					
Other Compensation							
	Housing Information	<u>on</u>					
Is Housing provided? Yes	No						
If yes, please describe the housing arrangements							
If no, will the facility assist with housing arrangements? Yes No							
	Other						
Are the students allowed to play	and practice at the facilit	ty?					
Yes No							
Are the students allowed time off to take the Playing Ability Test, if needed?							
Yes No							
Are the students allowed time off to take the PGA of America 2.0/3.0 Exams, if needed?							
Yes No							

Facility Contact

Title

Date

Phone

Email

