

Internship Application Form

Please print or type. The application must be fully completed to be considered. Please complete each section, even if you attach a resume.

Personal Information

Name (First, Last)

Address		City	State	Zip
Cell Phone Number	Other Phone Number (if any)	Email Address		
Name of School Currently Enrolled In		Major/Degree Program/Field of Study (if any)		

Interests/Hobbies/Sports:

Internship Position

What internship position are you applying for?	Available to Start (Date)	How many weeks are you interested in? <i>(min of 1, max of 7)</i>
Preferred hours? <input type="checkbox"/> Full Time (35-40 hours/week)	<input type="checkbox"/> Part Time (20 hours/week)	Questions/Comments:

Education/Certificates

School Name	Location	Years Attended	Degree Received	Major (if applicable)

Prior Experience (list any internship-related experience – i.e. training, volunteer work, paid work, at-home responsibilities)

Type of Experience (1)	Location (City/State)	Dates
Responsibilities/Duties		
Type of Experience (2)	Location (City/State)	Dates
Responsibilities/Duties		

References

Name	Relationship/Title	Phone	Email

Interests/Goals

What are some characteristics we should know about you? Why do you think you would be a good fit for this internship?

How does this internship fit in to your future, college, vocation and/or career goals, etc.? What do you hope to gain from this experience?

Signature Disclaimer

I certify that my answers are true and complete to the best of my knowledge.

Name (Please Print)

Signature

Date