

INTERN APPLICATION

Applicant Information										
Last Name			First				Date	Date		
Street Address								Apt/Unit		
City			State				Zip			
Phone			Cell Phone							
Email address	3:	'								
Have you eve	felony	?	If yes please explain:							
How did you hear about our internship program?										
Availability										
Please check semesters of availability: Fall /Winter Spring/Summer Other Oth										
Please check your general availability	Sunday	Mond	ay	Tuesday	Wednesday	Thursd	ay I	Friday	Saturday	
Morning (approx. 9-1)										
Afternoon (approx. 1-5)										
Evening (approx. 5-9)										
									1	
Areas of Interest										
Please indicate which area interests you:										
☐ Education ☐ Events ☐ Marketing ☐ Merchandising ☐ Photography								tography		
Research		ocial Me	dia	☐ Writi	ng					
Other, please explain:										

Experience/Educ	ation and Skills					
Current employment sta	atus: Full-time	Part-time Not Employed				
Current or most recent j	• •					
Are you currently a full Yes No	-time student?	If yes, please indicate school and concentration:				
Level		Areas of study:				
☐ Freshmen ☐ S	ophomore					
Senior G	raduate student					
Do you speak any other Yes No	languages?	If yes, please list language Fluent Semi-Fluent Basic				
Computer Skills/Softwa	are Used:					
Personal Informa	tion					
Why are you interested	in an internship in our orga	anization?				
What specific experience	ce would you like to gain th	nrough this internship?				
• •		·				
What do you feel you c	an add to our organization?)				
,, 1140 de jeu 1991 jeu 9	un waa to om organization.					
Professional Refe	rences					
Name	Relationship and contact info (e-mail and/or phone number)					
Disclaimer and Si						
I certify that my answers	are true and complete to the	best of my knowledge. If this application leads to an ading information in my application may result in my				
Signature:		Date:				