INTERNSHIP APPLICATION FORM GENERAL INFORMATION

Name:		Phone Number:
Address:		Undergraduate or Graduate Student:
City, State, Zip		E-Mail Address:
Major:	Minor:	GPA in Major: Cumulative GPA:
Expected Date of Graduation:		Hours in major:
		Student I.D. Number:
 Is this internship If yes, total num 	experience for academic cred ber of hours I will work per w	
	INTERNSHIP	SITE SELECTION
	ship are you looking for? (<i>Example accounting, soo</i> elected an internship site? YES	cial work, public relations, etc.) S or NO
f yes, where is you	r internship?()	Please list position, employer, city and state)
f no, where would	you like to do an internship? _	(Please list position, employer, city and state)
. To develop know	GOALS & wledge about:	COBJECTIVES
. To develop skill	s in:	
		appropriate faculty advisors to use this Internship Application Form in my n to be made available to prospective cooperating organizations furnishing an
		y heirs, successors, and assigns, any and all claims against Governors State ersity harmless with respect to all such claims, and all costs and expenses
Signatu	re	Date
	ll resumes must be reviewed l	rn application to Career Services, Room A1120) by a Career Specialist in OCS for final approval earding this application, call 708-235-3974