Internship Application

(Please "expand entry fields as needed.)

Student's Nam	e:			
SE ID (S0#####	##):			
Local Address:				
Local Phone: _				
Expected Date	of Graduatio	n:		
Semester you o	desire an inte	rnship:		
Type of interns	hip you desir	·e:		
Preference of i	nternship loc	ation:		
Hours complet	ed toward a (degree:		-
Communicatio	n Studies cou	urses and releva	ant UI courses (301,	345, 423, 425, 504)
Course #	Title		Grade	Semester/Year Taken
				
				
Pertinent Wor	k Experience	:		
Position		Company Nar	me/Address	
Supervisor			Dates	

Pertinent Work Experience (cont.):							
Position	Company Name/Address						
Supervisor		Dates					
Special Skills (Compute	er Proficiencies, Wri	ting Ability, Art Abili	ity, Etc.):				
Career Goal (List):							
Signaturo:			Dato				