

## Employer Application

**Application Deadline:**

(Please type or print)

Company:

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Type of Business:

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Department where intern will work:

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Address:

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City:

Zip:

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Web site:

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Internship contact:

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Phone:

E-mail:

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Internship Hours \_\_\_\_\_/week

Paid \_\_\_\_\_ \$ \_\_\_\_\_/hr

Unpaid \_\_\_\_\_

Number of students you need for:

Spring \_\_\_\_\_ Summer \_\_\_\_\_ Fall \_\_\_\_\_

**Job Description:**