EMPLOYER APPLICATION

Company:

Type of Business:

Address:

City/State/Zip:

Website: (required)

Internship supervisor/title:

Supervisor phone:       Supervisor EMAIL:

Intern will work _________ hours/week

Check one of the following and list amount of compensation

Paid: ________ $_________/hour

Stipend:_______ $_________/semester

Non-paid:_______

Number of students needed:_______

Spring_________ Summer___________ Fall___________

List specific duties/responsibilities of intern or attach a job description not to exceed one page: