

Internship Application Form

Student Information

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Cell Phone _____

E-mail _____

Phone (if different during internship) _____

Career Goal _____

Status

Current Classification _____ Freshman _____ Sophomore _____ Recent Graduate

Classification at time of internship _____ Freshman _____ Sophomore _____ Recent Graduate

Major _____ Double Major _____

Cumulative GPA _____ Student ID Number _____

Student Signature _____

Approval Signatures

Supervising Professor _____

Advising Center Director _____

Date Granted Approval _____

Call Career Services at 574-936-8898 ext. 353 or 350 for more information.

Mail application to: Ancilla College, Advising Center, PO Box 1, Donaldson, IN 46513