

Undergraduate Internship Application



Area(s) of Interest: _____

Internship Organization- list up to three (3) preferences:

1. _____

2. _____

3. _____

Semester for Internship: Term _____ Year _____

Name: _____

Student Identification Number: _____

Address: _____

Phone: _____ Email Address: _____

Class Standing: Junior Senior

Overall GPA: _____ History GPA: _____

How did you hear about our Internships? _____

History Courses Taken:

<u>Course</u>	<u>Semester</u>	<u>Instructor</u>	<u>Grade</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

What do you expect to gain from this internship experience that augments or contributes to your academic goals?

*Please attach a copy of your resume with this form.

Signatures of two (2) History Department faculty members familiar with your academic performance:

Print

Print

Sign Date

Sign Date