



Student Information

Name:

Student ID Number:

Email Address:

Phone Number:

Current GPA:

Date of Planned Graduation:

Fall Spring Summer

Year:

Date of Internship:

Fall Spring Summer

Year:

Have you taken ETST501? Yes No

If yes, what Semester and Year?

Placement Preferences

In order of preference, please list the organizations you are interested in being placed with.

1.

2.

3.

4.

5.

Academic and Organizational Fit

Please describe how the above listed organizations fit with your academic goals.

Why do you consider yourself to be a good fit with the above listed organizations?

What relevant knowledge, abilities, and skills could you bring to the organization that you are placed with? (Please include any language proficiencies).

Do you have any concerns or comments specific to placement with an organization?

Do you have any previous time commitments that would interfere with your ability to meet the internship requirements?

Enrollment in ETST687 is a time commitment to both class sessions and assigned internship hours, by signing below you acknowledge that you understand this commitment.

Student Signature: Date:

Revised April 2016