## **Internship Application**

Applicant's Signature

To be considered for an internship, you must submit a completed application form along with completed short answer questions and your resume. A cover letter is not required.

PERSONAL INFORMATION							
Name						pplication	
Address (Street, City, State, Zip) Phone #							
AVAI	LABILI	TV					
What days/hours are you available to work as an intern (Mon-Fri 9am-5pm)?							
		Monday	Tuesday	Wednesday	Thursday	Fri	day
AM							
PM							
OTHER INFORMATION							
Will this internship count towards academic credit?						Yes	No
House you are and ind for an intermedia with 1f 0						N	NT-
Have you ever applied for an internship with us before?						Yes	No
EXPERIENCE SUMMARY							
Please check all areas you have experience with:  Please describe any other skills or							
0	<ul> <li>Microsoft Word</li> <li>other internship related q</li> </ul>						
0	<ul> <li>Microsoft Excel that would support your a</li> </ul>						
0							
0	•						
<ul> <li>Database Software</li> </ul>							
<ul> <li>Fundraising</li> </ul>							
0	Market	ing					
CIIOD	T A NICE	WED ALTECTION	ra e				
SHORT ANSWER QUESTIONS On a separate sheet, please answer the following:							
1. Please describe why you want to be an intern at WFAE. Include how an internship would help you							
1.	achieve your career goals.						
2	2. As an intern, what relative experiences would you bring to WFAE?						
3. What skills do you wish to learn or enhance during your internship?							
APPLICANTS SIGNATURE							
I certify that all of my answers given here are true and complete to the best of my knowledge, and that							
supplying false information herein shall result in immediate disqualification for consideration for an internship,							
or termination from an internship regardless of when such false information is discovered.							

Today's Date