



## STUDENT INTERNSHIP INTEREST FORM

### Student Information

Student Name: \_\_\_\_\_ BANNER ID \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

### Job Information

Employer/Organization Name \_\_\_\_\_

Internship Title \_\_\_\_\_

Submit your cover letter (addressed to employer) and your resume. The Internship Program staff will review your cover letter and resume and contact you of your status.