## Job Shadow Student Application

Career Center Job Shadowing Program
PO Box 5620, 8 Clarkson Avenue
Potsdam, NY 13699
Phone: 315-268-6477
Fax: 315-268-7616
Email: career@clarkson.edu
www.clarkson.edu/knightlink
www.clarkson.edu/career

Date:					Fax: 315-268-7616 Email: career@clarkson.edu www.clarkson.edu/knightlink www.clarkson.edu/career		
First Name:		MI:	Last Name:				
Home Address:			Ed	Education			
City/State:			Ma	ajor:			
Zip/Postal Code:			Gra	d Mth/Year:			
Home Phone:				ss Standing:			
Cell Phone:				_			
E-mail:			Shadow opportunities will take place during spring break, March 19-23, 2012.				
Shadowing Logistics: Desired Employer:				If you have already identified one or more shadow opportunities on KnightLink that you			
Desired Location:			are	e interested in,	please list below.		
Desired Job Category:							
Please list desired shadow experiences from KnightLink in order of preference.							
What type of job or organization would you like to job shadow?   What type of job or organization would you like to job shadow?   What do you hope to get out of a job shadowing experience?   Carefully read the following requirements and sign below:   * I have successfully completed at least one semester at Clarkson University, and   * I have transportation to the job shadowing site, and   * I will be concurrently enrolled at Clarkson University at the time I job shadow.							
Job Shadowing can be for one day to several weeks depending on sponsor/student negotiated schedule.							
Student's Signature:				-			
Pleases	submit complete	ed form to the Ca	areer Center no	later than F	ebruary 1, 2012.		
Job Shadow Date(s):			nter Use Only				
Job Shadow Sponsor Nam							
Sponsor Title:							
Department:							