

INTERNSHIP APPLICATION



GRAHAM
MEDIA
GROUP

550 W Lafayette Boulevard
Detroit, MI 48226

ATTN: INTERNSHIP PROGRAM/HUMAN RESOURCES

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Student Name (Choose Area of Interest) _____ If other, please specify

Home Address Course of Study/Major

City State Zip Name of College

Home/Cell Phone Number City State Zip

Email

Projected Graduation Date Instructor/Counselor Name

Days/Hours Available for Internship Instructor's Phone Number

Term Applied for (Semester/Quarter) Beginning & Ending Dates

ATTACH A RESUME WITH THIS APPLICATION AND A PARAGRAPH STATING WHY YOU FEEL AN INTERNSHIP AT OUR STATION WOULD BENEFIT YOUR EDUCATION AND CAREER GOALS.

THE FOLLOWING MUST BE COMPLETED BY YOUR INSTRUCTOR/COUNSELOR.

The above named student will receive _____ credits for the internship.

Instructor/Counselor _____ Date Signed _____

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TO BE COMPLETED BY A STATION REPRESENTATIVE

_____ has been accepted for a paid internship position with STATION.

Signed by STATION Representative _____ Date Signed _____