



Internship Application

Name: _____

Street: _____

City/State/Zip: _____

Phone: (____) _____

E-mail: _____

College/University: _____

Year: _____

Major: _____

Term: Fall Winter/Spring Summer (circle one)

Please describe what you want to learn or achieve during your internship.

Is there anything specific on which you want to focus?

The Guild requires a commitment of 2 days a week. Which days are you available? We are open Tuesday through Saturday. Note that schedules are flexible and may be changed when needed.

Some of our events are in the evening. Will you be able to work for those events if your schedule permits?

Some of our events are on Saturday afternoon. Will you be able to work for those events if your schedule permits?

Are you receiving credit for this internship?

If yes, what are the requirements set by your school?
