

## Internship Interest Form RETURN WITH SCHEDULE REQUEST TO COUNSELOR FRI, 2/19/21

Student Name		Current Grade Level	
Address		(Iviust be in g	grade 12 next year to be an intern)
Parent/Guardian Name(s)		Contact Number	
Student Cell Phone Number		Email	
Emergency Contact		Emergency Number	
(On the back) Describe wi	hy you want to be an inter	n. What are your long-te	rm career goals?
In which of the following ca	areer fields are you interes	sted in pursuing an intern	ship?
Health Sciences (Intern/CNA/EMT)	Engineering	Education	Business
Culinary Arts	Construction Crafts	Graphic Arts	
Information Technology	Public Service/Law	Other	
field to which it applies.	th (or are you interested in		d above? List the class and the commentor/local business? If so,
Business Name		Contact Person	
Contact Phone Num	nber	NOTE OF THE PARTY	
<ul> <li>Internship Information:</li> <li>All internships must</li> <li>Placement in your fiel acceptance.</li> <li>Students who are interplacement.</li> </ul>	take place in St. Tamman eld of interest is not guara terested in interning in hig their own transportation t	y Parish, within the vicin nteed. Interns can only l h-interest fields may be	ne placed upon business asked to locate their own
Student Signature			Date
Parent Signature			 Date

Please attach a copy of your transcript to this form.