



## Student Intern Application

Name of applicant:

Last \_\_\_\_\_ First: \_\_\_\_\_ Date: \_\_\_\_\_

### Addresses

Current Address:

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_ (Cell) \_\_\_\_\_

E-mail: \_\_\_\_\_

Permanent Address:

Same As Above

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

College and University:

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Expected Graduation Date \_\_\_\_\_

### Dates and Times Available

Please Circle One:    Fall Internship       Spring Internship

START \_\_\_\_\_ FINISH \_\_\_\_\_

TIMES AVAILABLE (MINIMUM 10 – 20 HOURS PER WEEK)

MONDAY \_\_\_\_\_ TUESDAY \_\_\_\_\_

WEDNESDAY \_\_\_\_\_ THURSDAY \_\_\_\_\_

FRIDAY \_\_\_\_\_

**(OVER)**

1. Please list and describe relevant courses taken in college and any computer applications/software skills: \_\_\_\_\_  
\_\_\_\_\_

2. Please describe any experiences that demonstrate the following characteristics you have:  
*Responsibility:*

*Discipline:*

*Professionalism:*

*Teaching/Lecture:*

3. a) What do you hope to learn from this internship experience?

b) List any specific goals that you want to accomplish with this internship.

*University Internship Coordinator/Advisor:*

Name \_\_\_\_\_

Phone \_\_\_\_\_

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Signature of Advisor \_\_\_\_\_ Date \_\_\_\_\_

*Please mail Application, Resume, and a Recent Letter of Recommendation to:*

Amy Lutzel, Wellness & Fitness Coordinator  
Welborn Foundation Wellness & Fitness Center  
Ivy Tech Community College  
3501 N. First Ave  
Evansville, IN 47710  
Phone: (812) 429-0582  
Fax: (812) 429-1398  
E-mail: alutzel@ivytech.edu