



INTERNSHIP PRE-APPLICATION FORM

Deadlines for pre-application form submission:

Summer internships: Feb 1

Fall Internships: May 15

Spring Internships: September 15

***Please attach a copy of your degree works with the submission of this pre-application.*

Internship semester and year student is applying for: _____

Date of pre-application form submission: _____

Student Name: _____

Student ID#: _____

Student email: _____

Student advisor: _____

Top internship choice for application

Agency name: _____

Agency location (city/state): _____

CTRS Supervisor at agency: _____

CTRS phone number: _____

CTRS email address: _____

Please provide a detailed description of the proposed job duties for the internship. If possible, attach a copy of the job description.

Second choice for internship application:

Agency name: _____
Agency location (city/state): _____
CTRS Supervisor at agency: _____
CTRS phone number: _____
CTRS email address: _____

Please provide a detailed description of the proposed job duties for the internship. If possible, attach a copy of the job description.

*Please provide information for up to two back-up internship sites:**

Backup agency # 1 name: _____
Backup agency #1 location
(city/state): _____
Backup agency #1 CTRS Supervisor name/email
address: _____

Backup agency # 2 name: _____
Backup agency #2 location
(city/state): _____
Backup agency #2 CTRS Supervisor name/email
address: _____

**After student is approved to apply for top two choices, student must contact Carmen Hawkins (cbh@clermson.edu) before applying to backup sites.*