

CAREER SUCCESS CENTER



CAREER EDUCATION (CED 297)
INTERNSHIP APPLICATION
Suite 300 Westside Campus Center
phone: (203) 837- 8264
manented@wcsu.edu
www.wcsu.edu/careersuccess/students/coop.asp

FOR OFFICE USE ONLY

Applicants: Please complete sections B, C, D, and E. **Section A to be completed by CSC staff during your appointment.**

SECTION A (To be completed by Internship Coordinator during meeting.)

Internship Coordinator's Name Debra Manente Today's date _____

Semester/s available _____ PT _____ FT _____ 6-Month _____

Preferred number of weekly hours _____ Geographic preference _____

Transportation? Yes _____ No _____ Willing to commute? Yes _____ How far? _____ No _____

Areas of interest: 1st choice _____, 2nd choice _____

3rd choice _____, 4th choice _____

Other _____

Resume: draft? _____ reviewed? _____ approved? _____

SECTION B (To be completed by Student during meeting.)

Name _____ Student ID number _____

Address (if living on-campus or different than permanent address)

City _____ State _____ Zip _____ Phone _____

PERMANENT ADDRESS

City _____ State _____ Zip _____ Phone _____

WCSU Email Address _____

U.S. Citizen: Yes _____ No _____ If no, visa type and number _____

Are you legally permitted to work in the USA? Yes _____ No _____

EDUCATIONAL INFORMATION

Major _____ Concentration/Minor _____

Credits currently completed _____ Overall GPA _____ Expected graduation date _____

Faculty Advisor _____ Faculty Advisor's Email _____

MORE ON OTHER SIDE...

SECTION C (To be completed by Student during meeting.)

EMPLOYMENT AND/OR EXPERIENCE

Please list any permanent, cooperative, intern, voluntary, summer, civic, community or military, most recent experience first:

NAME AND CITY OF EMPLOYER	NATURE OF WORK	EMPLOYMENT DATES

SECTION D (To be completed by Student during meeting.)

PLEASE ANSWER THE FOLLOWING...

1. I would be willing to work in a non-paid internship. Yes_____ No_____
2. I currently have a 2.0 GPA and will have completed 45 credits by the time the internship begins. Yes_____ No_____
3. I understand that attainment of an internship position requires registration for credit at WCSU and payment of all applicable fees. Yes_____ No_____
4. I understand that a passing grade for CED 297 will also involve attending all required seminars/meetings, maintaining discussion board participation, completing a final paper and submitting evaluations/surveys on the due dates. Yes_____ No_____
5. I agree that my résumé may be shown, or electronically submitted by the CSC, to prospective internship employers. Yes_____ No_____
6. I realize that selection for an internship job is at the discretion of the employer and that this application does not guarantee selection for an internship. Yes_____ No_____

Student's Signature _____ Date _____

SECTION E (To be completed by Student during meeting.)

The Career Education Internship Program at Western Connecticut State University is open to any student regardless of sex, age, race, religion or national origin. Applicants are requested to complete the following section to assist the Career Success Center in collecting Affirmative Action Data. This file is not open to review by any outside source and none of this information will be used in any way to prevent a student from participating in the program or being placed with an internship employer.

Sex: Male _____ Female _____ Other _____

Birthdate _____

- CHECK ONE: _____ Native American
_____ Asian/Pacific islander
_____ Black/Not of Hispanic Origin
_____ White/Not of Hispanic Origin
_____ Hispanic

- IF YOU NEED ACCOMMODATIONS BECAUSE OF A DISABILITY, PLEASE DISCUSS THIS WITH THE INTERNSHIP COORDINATOR AND CHECK HERE : _____