

ORLEANS STUDENT INTERN PROGRAM APPLICATION

FILL OUT FORM COMPLETELY

Name _____ Age _____ Date Submitted _____
Last First Middle

Home Address _____
Street City Zip Code

Phone _____

Parent/Guardian Name _____ Phone _____

Will you be involved in sports or after school activities? Yes No
If so, what? _____

Are you currently employed? Yes No If so, where? _____

If so, what are your exact work responsibilities? _____

GPA _____ (2.0 or better required)

Days absent this year? _____ reason _____

Days tardy this year? _____ reason _____
(students may be denied due to excessive absences or disciplinary issues)

Career interests after high school 1. _____

2. _____

Pathways completed by the end of junior year _____

Career area in which you would like to intern education business manufacturing/engineering
 ag mechanics/mechanics animal sciences culinary OTHER _____

Do you plan to continue your education following graduation? Yes No
Please indicate your plans. college trade/technical school apprenticeship military
If you do not plan to continue your education, where do you hope to work after graduation? _____

Do you have your own transportation to and from intern? Yes No (you cannot rely on other students)

Any other circumstance we should be aware of?

(continued)

In a few sentences, explain the reasons you should be considered for this internship.

Place of internship in mind? _____

Do you know if a morning or an afternoon would be better for you? Mon/Wed or

Tues/Thurs? _____

(Sometimes sites aren't open on Mondays or maybe they don't open until 10 am)

Return this application to Mrs. Hall by ***February 8.***

***You will be notified as soon as applicants are selected for the program and placements will be arranged.**

Office only

Absences _____

Discipline _____

Teacher approval _____

Capstone _____ internal
 external
