

CAVALLA INTERNATIONAL UNIVERSITY

INTERNSHIP/CLERKSHIP APPLICATION FORM

Name: _____ D.O.B _____ (mm/dd/yy)
(Last) (FIRST) (MI)

Local Address: _____
(street) (City) (Zip)

Permanent Address: _____
(If different) (street) (City) (Zip)

Home Phone: (_____) _____ Work Phone: (_____) _____

Email Address _____

IN CASE OF EMERGENCY CONTACT

Name _____ Relationship _____

Contract #: Cell: _____ Home: _____

I am applying for the Fall / Spring / Summer / Winter Semester. (circle one)

Dates _____

What year are you in? _____

What is your Major? _____

Email Address: _____

Please identify up to four shifts with a total of at least 20 hours/week.

Day	AM	PM
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		

Student Signature _____ Date _____

Completed by Employer of Student - Intern

The Information above is verified and accurate to the best of my knowledge.

Staff Name: _____

Signature _____ Date: _____

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Please respond to the questions below.

Why do you want to intern at this employer?

What are your Strengths?

Employers are always looking for interns with the following skills, please identify areas that you can/or would like to contribute to:

Enter Your Skills Here

Aside your regular intern hours will you be available to participate in Employer events during the semester?

Yes No

Please email application form and resume to your employer where you are doing the Internship/Clerkship. If we feel that you are a good fit for employer, you will be invited for a short interview and orientation before the Semester begins with the employer.