



Intern Application Form

Name: _____

Address: _____

Phone #: _____

E-Mail: _____

What is the best method and time to contact you?

What is your Major or Field of Study?

What is your semester standing?

Please identify the program area (s) you are interested in (please rank, if more than one):

- Campus Prevention
- Mentoring
- Safe Schools and Communities
- Underage Drinking Prevention
- Media/Technology
- Fund Development

When are interested in doing the internship?

- Fall 2006
- Spring 2007
- Summer 2007

Please attach a resume or list of past work experiences, special skills, and at least 2 references