

EXECUTIVE INTERNSHIP QUESTIONNAIRE

Applicants Name	School
Cell Phone	Email Address
Specific Career Field	Semester
Many of our businesses require you to be a US citizen	I am a US citizen <input type="checkbox"/> Yes <input type="checkbox"/> No (Optional)

Share what you anticipate your senior year to look like

Semester	Academics	AP/Honors	After School Activities (such as sports, band, musical, clubs)
First Semester		#	
Second Semester		#	

Outside Activities: What other activities are you involved in after school?

Job (where and how often?)	Evenings?
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The internship requires you to provide your own transportation, Do you...

Have a car?	Have access to public transportation?	Someone will take me <input type="checkbox"/>
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How many hours a week do you think you will be able to devote to the internship? What days?

Why have you chosen this career field?

What courses have you taken to prepare you for this career? List the classes or specific things that will help place you in this career.

What do you expect to gain from the internship?

What are your plans after you graduate? Do you know the school(s) and/or degree you hope to pursue?

Skills: list any skills that you have that will help place you in the industry. (ex. AutoCAD, Excel, Photo Shop, computer)

Do you have any ideas where you would like to intern? Do you know anyone that might sponsor you?