

Mahwah High School
Work-Based Learning Experience
Career Internship Application

* This application must be completed in its entirety in order for a student to be considered for the program.

Circle one: Fall 20__ Spring 20__ Summer 20__

Student: _____
(Last Name) (First Name)

Address: _____

Cell Phone #: _____ Home phone #: _____

E-mail address: _____ DOB: _____

Guidance Counselor: _____

Referred to Program by: _____

Career Pathway: _____

Area(s) of Career Interest #1: _____ #2: _____

ESSAY QUESTION

Please type a brief essay and attach to this application.

Describe your interests and explain why you would like to participate in the Career Exploration Internship Program.

Do you have any school/employment obligations that may interfere with your internship?

No ____ Yes ____ (please explain) _____

Do you have any health issues that may affect your internship attendance?

No _____ Yes _____ (please explain) _____

Emergency Information	
Full Name of Parent/Guardian:	_____
Parent Home Phone:	_____
Parent Work Phone:	_____
Parent Cell Phone:	_____
Emergency Contact (Full Name):	_____
Relationship:	_____ Phone: _____

Student Signature: _____ **Date:** _____

I hereby give permission for my son/daughter to participate in the Mahwah High School Work-Based Learning Program.

Parent/Guardian Signature: _____ **Date:** _____

Application and Essay Due No Later Than: