



# INTERNSHIP APPLICATION

*Fill out this application form and bring to the SoA Print office to submit. You will be notified by email of the status of your application. Thank you for your interest.*

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

G #: \_\_\_\_\_

Year: \_\_\_\_\_

Major: \_\_\_\_\_

Minor: \_\_\_\_\_

## AVAILABILITY

*Please mark general time slots you will likely be available on a weekly basis.  
If your schedule is not yet set, leave blank.*

	AM	PM
<b>Monday</b> (9:45am-7:15pm)		
<b>Tuesday</b> (9:45am-7:15pm)		
<b>Wednesday</b> (9:45am-7:15pm)		
<b>Thursday</b> (9:45am-7:15pm)		
<b>Friday</b> (11:45pm-4:15pm)		

## **EXPERIENCE**

**(1) Describe your work experience, including volunteer experience.**

**(2) List any skills you have that relate to this internship, including customer service and/or familiarity with software and applications.**

**(3) Tell us what interests you about interning at SoA Print.**