SUMMER ’18 CHICAGO INTERNSHIP PROGRAM APPLICATION

NAME

EMAIL

CELL PHONE

MAILING ADDRESS

(Street)

(City) (State) (Zip)

COMMUNICATION MAJOR CONCENTRATION \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OR OTHER MAJOR \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EXPECTED DATE OF GRADUATION \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Tell us about yourself…**

**What interests you in the Chicago Summer Internship Program?**

**What internships have you had to date (please provide the organization name and describe your role)**

**Which college courses have most influenced your professional path? How so?**

**Please rank in order of preference your desired internship:**

\_\_\_\_MISERICORDIA \_\_\_\_HOLY TRINITY HIGH SCHOOL

\_\_\_\_MERCY HOME FOR BOYS & GIRLS \_\_\_\_CYCLEBAR

\_\_\_\_RUSH MEDICAL CENTER \_\_\_\_UTLA BEAUTY

\_\_\_\_NBC-5

**What skills do you bring to the position?**

Will you require housing? \_\_\_\_YES \_\_\_\_NO

\_\_\_My resume is attached \_\_\_\_ My writing sample is attached \_\_\_\_\_I have a cover letter drafted

QUESTIONS? CONTACT DR. MARGARET FINUCANE (mfinucane@jcu.edu)