

## Work Experience Application

Work Experience Education Application for (check one):

☐ OCCUPATIONAL INTERNSHIP   ☐ GENERAL WORK EXPERIENCE



### Student Information

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

Student ID #: \_\_\_\_\_

Home Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

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

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

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

### Employer Information

Supervisor's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Company's Phone: \_\_\_\_\_

Supervisor's Phone (optional): \_\_\_\_\_

Supervisor's Email Address: \_\_\_\_\_

### General Information

Student's Major: \_\_\_\_\_

Occupational Goal: \_\_\_\_\_

Faculty Advisor: \_\_\_\_\_

I plan to work \_\_\_\_\_ hours per week.

I plan to enroll in \_\_\_\_\_ semester units.

I have previously completed \_\_\_\_\_ units of Occupational Internship or units of General Work Experience.

The courses I have completed in my major are (List course numbers, i.e. ADS 101, 102, 103): \_\_\_\_\_

My internship title is: \_\_\_\_\_

My internship is (check one): ☐ NON-PAID or ☐ PAID

My work schedule is: \_\_\_\_\_

My job duties include: \_\_\_\_\_

\_\_\_\_\_  
**Student's Signature**

\_\_\_\_\_  
**Supervisor's Signature**

*To the best of my knowledge, all of the above information is true and correct.*

#### FOR STAFF USE ONLY

Transcripts have been reviewed and courses required prior to enrollment are:

- ☐ Completed  
☐ In-Progress  
☐ Not Completed

Verified By: \_\_\_\_\_