

Susan Swanson Memorial Internship Application



Personal Information:

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

Date of Birth: _____

Current Study Status:

Institution: _____

Program of Study: _____

Length of Program: _____ Years Completed: _____ Anticipated Graduation year: _____

Overall GPA: _____ Major GPA: _____

Please list completed course work relevant to internship:

Please list honors, awards, work experience, extracurricular activities, and leadership roles that support your candidacy for this internship:

Dates Available:

Candidate is available to begin on : _____ and must end by: _____

Please initial the following to verify compliance:

_____ Candidate is a current PA resident.

_____ Candidate possesses valid PA Driver's License, has reliable transportation, is willing to travel.

_____ Candidate acknowledges that program may involve outside work in inclement weather.

Signature of applicant _____ Date: _____

To be considered for the internship position, please submit the following to ashields@ahug.com no later than 11:59 pm on March 31st:

- 1) Completed application
- 2) Verification of GPA
- 3) Resume
- 4) An essay (500 words max) describing your career aspirations and how you feel that this internship opportunity and the leadership of Susan Swanson and AHUG will be valuable to you in achieving your goals.