



ALP Intern Application Local

When requested, please type answers on an attached sheet of paper. Apply for a maximum of three internships.

*****Submit a copy of the application form and your résumé/goals for each internship for which you are applying.*****

INTERN LOCAL CONTACT INFORMATION:

Name of Intern: _____
 Address - Street: _____ City: _____ State: _____ Zip: _____
 Phone Number: _____ Univ. of Rochester E-mail address: _____

INTERN PERMANENT CONTACT INFORMATION:

Address - Street: _____ City: _____ State: _____ Zip: _____
 Phone Number: _____ Alternate E-mail address: _____

SCHOOL INFORMATION:

Student ID #: _____ Expected Date of Graduation: _____ Credits Remaining: _____
 Studio Teacher: _____ Degree Program: _____ Instrument: _____
 Do you have any recital plans? No Yes If yes, tentative dates are: _____

ELIGIBILITY/ FINANCIAL/ OTHER:

Are you a registered full time student?	_____	Yes	_____	No
Do you have an I-9 on file in the Financial Aid Office ?	_____	Yes	_____	No
Do you have Federal Work Study?	_____	Yes	_____	No
Do you have transportation?	_____	Yes	_____	No
Are you a current UR employee*?	_____	Yes	Emp ID _____	No

(*student worker or receive graduate stipend)

RÉSUMÉ/ QUALIFICATIONS/ GOALS

- **RÉSUMÉ** -- Please attach a current résumé outlining your background, work experience and qualifications. Be sure to include any work experience you have had at Eastman.
- **GOALS** -- On a separate sheet, please identify your long term career goals, and at least two paragraphs on your expectations and goals for this internship experience.

POSITION APPLICATION:

Local internship(s) for which you would like to apply: (rank in order of preference; apply for no more than three)

1. _____
2. _____
3. _____

SIGNATURE:

Applicant: _____ Date: _____