INTERNSHIP APPLICATION

SEND RESUME AND APPLICATION TO: enava@kprc.com

ATTN: INTERNSHIP PROGRAM

Student Name Home Address			Indicate Area of Interest (pick one only) News, Sports, Weather or Digital Course of Study/Major		
Home/Cell Phone Number			City	State	Zip
Email					
Projected Graduation Date			Instructor/Counselor Name		
Days/Hours Available for Internship			Instructor's Phone Number		
Term Applied for (Semester/Quarter)			Term Applied for (Beginning & Ending Dates)		
ATTACH A	WING MUST BE COMP RESUME WITH THIS PAT OUR STATION W	APPLICATION	NAND A PARA	GRAPH STATING W	
The above named student will receive			credits for the internship.		
Instructor/Counselor			Date Signed		
	TO BE CO	SMPLETED BY	A STATION REF	PRESENTATIVE	
		has been accep	oted for an interns	hip position with STAT	ΓΙΟΝ.

Signed by STATION Representative

Date Signed_____

