



Internship Application Form

861 Bedford Road, Kessel Suite 200, Bedford, NY 10570

Phone: (914) 773-3848 Fax: (914) 989-8367

Student Name

Name of Internship Provider

Student U ID

Student email

Address of Provider

Name and title of Supervisor

Number of Hours per week

Email of Supervisor

Length of Internship (weeks)

Phone Number of Supervisor

Total Number of Internship Hours

Please attach a letter written and signed by your internship provider/manager describing your duties, the nature of your work and the length of the internship.

Dr. Mohsen Shiri-Garakani, Director

Date

Acceptance of this form is at the discretion of the Honors College Director

Please return all copies of this form to the Pforzheimer Honors College Office,
861 Bedford Road, Kessel Suite 200, Bedford, NY 10570, or fax the form to (914) 989-8637