

DEPARTMENT OF MARKETING AND INTERNATIONAL BUSINESS

Hagan School of Business

MARKETING INTERNSHIP APPLICATION

Directions to student: Type or print your answers to the questions in Part I. After you have completed Part I (including resume), give it to a member of the Marketing Faculty who knows you well enough to recommend you by answering the questions in Part II. He or she will return the completed form (with resume attached) to Dr. Susan Rozensher, Internship Coordinator of the Marketing and International Business Department. The completed application must be received **by the end of the advisement period before the internship semester (i.e., fall for spring internship; spring for summer or fall internship).**

Part I. (To be completed by student applicant)

Internship application for: ___ Fall ___ Spring ___ Summer semester of _____ (Year)

1. Name: _____
2. Address during school year:

3. Telephone number during school year: _____ e-mail _____
4. Permanent address (if different from above):

5. Permanent telephone (if different from above): _____
6. Major: _____ Minor (if any): _____ Cum GPA _____
7. Expected date of graduation: Month _____ Year _____ Student ID# _____
8. Work experience--either **attach your resume** or on a separate sheet of paper, list in reverse chronological order, the dates of any past employment, the number of hours worked per week, the name and address of your employer(s) and a brief description of the work you did.
9. Why do you want to participate in a credit internship (MKT465 IS)?

10. Have you already located a marketing internship position, or are you in the process of finding one through friends, relatives or other contacts? If so, please describe it here:

11. If we will be helping you to find an internship, please list your preferences, if any, regarding field or industry (e.g., sports and event marketing, retailing, promotion, direct marketing, etc.) and geographical location (e.g., NYC, Westchester, CT, NJ).

Part II Faculty Recommendation
To be completed by member of the Marketing faculty, and returned to
Dr. Susan Rozensher, Internship Coordinator

1. Faculty member name: _____

2. How long have you known this applicant: _____

3. How would you rate this applicant on each of the following?

	<u>Above Average</u>	<u>Average</u>	<u>Below Average</u>	<u>Don't Know</u>
a. Oral skills	()	()	()	()
b. Writing ability	()	()	()	()
c. Analytical ability	()	()	()	()
d. Ability to get along with others	()	()	()	()
e. Ability to work independently	()	()	()	()
f. Ability to follow directions	()	()	()	()
g. General Appearance	()	()	()	()

4. Do you recommend this applicant for the internship program?

_____ Strongly Recommend _____ Recommend _____ Do not recommend

Please explain:

5. Do you want the information that you have provided above to remain confidential?

_____ Yes _____ No

Signature: _____ Date _____