



Multicraft Extended Internship Program

Student Application

Name:

Address:

City:

State:

ZIP:

Phone:

E-mail:

Why are you interested in this Multicraft Extended Internship program?

What education, skills or experience do you already have that will make you a good candidate for a Multicraft Extended Internship position?

What have you done in school or life to show you would be a successful team player and dependable employee?

What do you hope to gain from participating in this program?

What are your long term goals for your career?

(Please attach a resume if you have one)

Internship Agreement: I understand that the Multicraft Technology Degree Extended Internship Program requires a commitment to go to classes two days a week and work for a participating employer three days a week for a wage to be determined by the employer. I am expected to maintain passing grades and acceptable attendance at school and at work. I permit Sauk Valley Community College to share grade and attendance information with the employer I intern with. I understand that employment at the employer is "at will" with no guarantees of future employment or contractual obligations by either party. Either the employer or I can terminate the employment at any time for any reason.

Signature: _____ Date: _____