Internship Application

Year 201____  Semester:  Fall____  Winter____  Spring____  Summer____

(Print) Last Name  First  SMC ID Number  (______)______________
Cell/Message Telephone

Street Address  City & State  Zip Code

(______)  E-Mail Address (Best contact one)  2nd Email Address

International Students:  Are you an international student?  Check:  Yes_____  No_____
If yes, have you attached the IEC approval sheet?  Yes_____  No_____  Comment________________________

INTERNSHIP EMPLOYER’S CONTACT INFORMATION (Please print legibly)

Company/Agency Name  Street Address  City  Zip Code

Immediate Supervisor  Supervisor’s Job Title  Supervisor’s Telephone Number

Supervisor’s E-Mail Address  Website of Company/Agency

Human Resources (HR) Contact*  E-Mail Address in HR*  FAX Number of HR*

*If the Human Resources office is an important contact for your internship, please write in how to reach them in the spaces above.

ADDITIONAL INFORMATION  Internship Course Title:________________________    Section Number:_______

How many SMC units were you enrolled in and successfully completed in the previous full semester (Fall or Spring)? _______

Total Units of Internship Credit(s) _______  Unpaid Internship_______  Paid Internship_______

HOURS OF WORK REQUIRED FOR CREDIT:

I need to work_________ hours this semester to earn the internship credit. BE SURE YOU CAN COMPLETE ALL THE REQUIRED HOURS IN THE TIME YOU HAVE LEFT FOR THE SEMESTER! YOUR GRADE DEPENDS ON IT.
(If paid, 75 work hours X the number of units; if unpaid, 60 work hours X the number of units)

The above statements are true to the best of my knowledge:

Student_________________________________  College Instructor or SMC Internship Staff_________________________________  Today’s Date______

FOR OFFICE STAFF ONLY:  Please initial:________________________

Attended Orientation Session:  Yes_____  No_______  Date Attended Orientation:________________________
Successfully completed at least 6 units in the prior Fall or Spring Semester:  Yes_____  No_____  N/A_______
Internship Courses Taken in the Past: Counseling 90_______  Successfully Passed Internship Course(s): Yes___  No____
Additional Comments:________________________________________________________