



# STUDENT INTERNSHIP APPLICATION

ALTON HIGH SCHOOL

4200 Humbert Road

(618) 474-2700

## Personal Information

Student Name:

Date of Birth:

Address:

Email:

Phone:

Parent/Guardian:

Grade Level:

## Internship Information

Internship Opportunity Applying For:

Company/Employer:

Date Available to Start:

## References

Please list at least two Alton High teachers/staff members who will serve as a reference for you (be sure to request the teacher or staff member's approval to serve as a reference prior to submitting this application):

1)

2)

## Previous Work Experience

EMPLOYER:

POSITION:

DATES OF EMPLOYMENT:

1)

2)

## Skills & Training

Please list any and all skills, training and/or characteristics you hold that would contribute to your success in an internship or work experience opportunity:

### Schedule of Availability

Please list any days of the week that you would not be available to work before or after school during extended internship hours or training (if needed):

**WILL YOU HAVE TRANSPORTATION TO/FROM THE INTERNSHIP LOCATION OR PLACE OF EMPLOYMENT AND BACK TO/FROM SCHOOL OR HOME?**

☐

**YES**

☐

**NO**

☐

**UNSURE**

### Required Attachments

**Attachments:**

☐

**Cover Letter**

☐

**Resume**

### Signatures

**SIGNATURE OF STUDENT APPLICANT:**

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**DATE:**\_\_\_\_\_

**SIGNATURE OF PARENT/GUARDIAN:**

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**DATE:**\_\_\_\_\_