



**Intern Request**

**Company Name** \_\_\_\_\_

**Accredited Member First Name** \_\_\_\_\_ **Accredited Member Last Name** \_\_\_\_\_

**Designation** \_\_\_\_\_

**Street Address** \_\_\_\_\_ **Phone Number** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Location of Internship** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_

**Anticipated Intern Responsibilities/Duties** \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

**Proposed Compensation** \$ \_\_\_\_\_ per hour **Total Hours/Week** \_\_\_\_\_

**Amount of Travel Required** \_\_\_\_\_ hours/week

**Date Internship Available** \_\_\_\_\_

**Requested Last Day of Internship** \_\_\_\_\_

**Intern Requested\*** \_\_\_\_\_

*\*Companies do not need to have intern designated to apply.*