



CONTACT INFORMATION

Name _____
Address _____
City _____ State _____ Zip Code _____
Phone _____ Email Address _____

EDUCATIONAL INFORMATION

School _____ Major _____
Junior _____ Senior _____ Other (Explain) _____

INTERNSHIP INFORMATION

Program Contact _____
Address _____
City _____ State _____ Zip Code _____
Phone _____ Email Address _____
Is the Internship for credit? _____ Yes _____ No _____
Start Date _____ End Date _____
School program requirements. _____

Why do you want intern at VisitLEX? _____

What do you expect to learn? _____

How does your school and/or previous work experience relate to this internship? _____
