



Internship Application

Please mail or fax this form along with your resume to:

PHL17 / 5001 Wynnefield Avenue / Philadelphia, PA 19131

or submit via fax to: (215) 877-4912

PERSONAL INFORMATION

NAME _____ EMAIL _____

ADDRESS _____ ADDRESS _____
(HOME) (COLLEGE)

PHONE (HOME) _____ PHONE (COLLEGE) _____

EDUCATIONAL & EMPLOYMENT BACKGROUND

Please attach a copy of the following:

1. One copy of your resume- It should include (but not limited to):
 - Educational background (institutions attended, majors, dates attended)
 - Work experience (employer, dates worked, duties and responsibilities, supervisors)
 - Computer experience (knowledge of different software packages)
 - Special skills or attributes that might be useful for particular internship you are applying for
 - Related clubs & organizations, certifications, extracurricular activities, other internships
2. Cover letter which must include
 - Personal introduction
 - Department you would like to intern for
 - Your school beginning and end dates for the semester during which you wish to intern
 - Days and times available during internship period

NAME OF SCHOOL _____

MAJOR _____

OVERALL GPA _____ MAJOR GPA _____

INTERNSHIP COUNSELOR/ADVISOR _____

PLEASE LIST COURSES & EXPERIENCE THAT ARE RELEVANT TO THE POSITION APPLIED FOR:

TERM APPLIED FOR:

Semester/Quarter _____

Semester/Quarter beginning & ending dates _____

DEPARTMENT APPLYING FOR? _____

WITH AN "X" PLEASE INDICATE DAYS AND TIMES THAT YOU ARE AVAILABLE TO WORK AT PHL17.

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
5:00 AM					
6:00 AM					
7:00 AM					
8:00 AM					
9:00 AM					
10:00 AM					
11:00 AM					
12:00 PM					
1:00 PM					
2:00 PM					
3:00 PM					
4:00 PM					
5:00 PM					
6:00 PM					

THE FOLLOWING MUST BE COMPELTED BY YOUR INTERNSHIP COUNSELOR:

The above named student will receive _____ credits for this internship.

INTERNSHIP COUNSELOR _____ DATE _____

(SIGNATURE)

Please return this application along with your resume and cover letter to:

PHL17 WPHL-TV
5001 WYNNEFIELD AVE
PHILADELPHIA, PA 19131
(FAX) 215-877-4912

STATION USE ONLY

INTERVIEWED BY _____ DATE _____

ACCEPTED? YES _____ NO _____ REPORT DATE _____

DEPARTMENT HEAD SIGNATURE _____