



## WXPn Unpaid Internship Application

RETURN TO: Student Coordinator, WXPn, 3025 Walnut St, Philadelphia, PA, 19104 \* fax: 215-573-2152  
volunteers@xpn.org

Name \_\_\_\_\_ Date \_\_\_\_\_

### Contact Information

Email Address \_\_\_\_\_ Home Phone \_\_\_\_\_

Permanent Address \_\_\_\_\_ Cell Phone \_\_\_\_\_

Temporary/Address @ School \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Em. Contact Work Phone \_\_\_\_\_

Relationship to you \_\_\_\_\_ Em. Contact Cell Phone \_\_\_\_\_

School Name \_\_\_\_\_ Major \_\_\_\_\_ Exp. Grad Date \_\_\_\_\_

### *How did you hear about the WXPn unpaid Internship Program?*

Newspaper Ad \_\_\_\_ Web Site \_\_\_\_ Flyer \_\_\_\_ Friend \_\_\_\_ Teacher \_\_\_\_ Other \_\_\_\_\_

### *Which Internship are you applying for?*

\_\_\_\_\_

What are your available start *and* end dates? \_\_\_\_\_

Can you make a commitment through the school year? \_\_\_\_ If no, when do you need to quit? \_\_\_\_\_

What days and hour are you available to work? \_\_\_\_\_

Would you need time off for vacations? \_\_\_\_\_ If yes, what are the dates? \_\_\_\_\_

Have you applied for an XPN internship before? \_\_\_\_\_ Have you ever worked at XPN? \_\_\_\_\_

*If needed, please use a separate piece of paper to complete your answers.*

What other internships are you seeking this year (other than at XPN)? \_\_\_\_\_

If you are seeking credit for your internship, what are the parameters/goals/purpose of you need to meet and why are you interested in fulfilling them at WXPN? \_\_\_\_\_

What are your talents, interests and experiences which make you a good candidate for this position? \_\_\_\_\_

What do you expect to gain from an internship at WXPN? \_\_\_\_\_

**CONSENT**

I understand that I am applying for an UNPAID position working under the supervision of a WXPN employee.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_