



APPLICANT INFORMATION					
Term: Summer ____ Fall ____ Spring ____			Year:		
Last Name		First	M.I.	DOB	
Street Address			Apartment/Unit #		
City		State	Zip	SSN	
Phone		Email Address			
Emergency Contact Name		Relationship		Phone	
Are you a citizen of the United States?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.? YES <input type="checkbox"/>	
				NO <input type="checkbox"/>	
Have you ever volunteered for this Foundation?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?	
Have you ever been convicted of a felony?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain.	
EDUCATION					
College (Masters)		Address			Year
From	To	G.P.A.		Major	
College (Bachelors)		Address			
From	To	G.P.A.		Major	
MENTEE PREFERENCES					
Gender: Male ____ Female ____ No Preference ____		Languages			
Concentration: Broadcast (TV) ____ Broadcast (Radio) ____ Print ____ Photography ____ Other _____					
REFERENCES					
<i>Please list two professional references.</i>					
Full Name			Relationship		
Company			Phone ()		
Email Address					
Full Name			Relationship		
College			Phone ()		
Email Address					
DISCLAIMER AND SIGNATURE					
I certify that my answers are true and complete to the best of my knowledge. I understand that false or misleading information in my application or interview may be grounds for future dismissal from the position or withdrawal of internship offer.					
I understand that my work with the Sameera Gokal Foundation is as an unpaid intern and will not be compensated monetarily. I also understand that I am not entitled to employment at the Sameera Gokal Foundation, Inc. at the conclusion of the Internship.					
Signature				Date	