

# Signature Services Application For Summer Internship

*(U.S.A. students only)*

(Please Print Plainly)

Please return by: March 1, 2004

<b>Office Use Only</b> Approved/Disapproved by: _____ Date Notified: _____
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Name: \_\_\_\_\_ Date: \_\_\_\_\_

Social Security No. \_\_\_\_\_ E-Mail \_\_\_\_\_

Present Address: \_\_\_\_\_  
Street City State Zip

School Telephone No: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Home Telephone No: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Are you legally eligible for employment in the U.S.A.? Yes \_\_\_\_\_ No \_\_\_\_\_

If you are selected for the summer internship program, on what dates will you be available for work? \_\_\_\_\_

Are there any experiences, skills, or qualifications, which will be of special benefit for the internship?

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Name of School: \_\_\_\_\_ Course Advisor: \_\_\_\_\_ Phone/Email \_\_\_\_\_

Major: \_\_\_\_\_ Classification: \_\_\_\_\_ G.P.A. \_\_\_\_\_

Course Advisor's Approval: \_\_\_\_\_ Recommended Credit Hours: \_\_\_\_\_  
Signature

List three references below:

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Briefly discuss why this internship program will benefit you and your field of study:

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The facts set forth in my application are complete and true. I understand that if employed, any false statement on this application may result in my dismissal. I further understand that this application is not intended to be a contract of employment, nor does this application obligate the employer in any way if the employer decides to employ me. I understand and agree that my employment is at-will and can be terminated by either party with or without notice, at any time, for any reason or no reason. No one other than an officer of the company has any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing and then only in writing signed by an officer.

\_\_\_\_\_  
Signature of Applicant