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|  | PRELIMINARY STUDENT INFORMATION FORM CIP-1 |

**ATTACH A RESUME. RETURN COMPLETED FORM TO BRIGID BEACHLER, MANAGING DIRECTOR, 119 IVES HALL.**

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| **Date:**  |
| **Student Name:** |       |
| **Ithaca Address:** |       |  | **Ithaca Phone:** |       |
| **Home Address:** |       |  | **Home Phone:** |       |
| **E-Mail:** |       |  | **Student ID No.:** |       |

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| **Class Year:** |       | **No. of Terms at Cornell:** |       | **Credit Hours Completed:** |       |

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| --- | --- | --- | --- | --- | --- | --- |
| **Have you Completed all ILR required courses?** |  | [ ]  | **Yes** | [ ]  | **No** | **(If no, list those required courses still to be completed below.)** |
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| **Cumulative Average:** |       |
| **If average is less than a B, are there any special factors which you feel should be considered in your case?** |
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| **What kind of internship experience would you like?** |
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| **What course work or work experience do you have that you feel will provide background for your proposed internship work?** |
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| **Do you already have contact with an organization in which you might serve as an intern?** |
| [ ]  | **No** | [ ]  | **Yes** (**Provide organization name, contact, address, contact phone and email below.)** |
|       |

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| **Semester and year seeking internship:** |       |
| **Location (s) desired for internship: Please list below.** |
|       |

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| **H****ave you ever been subject to disciplinary action?** | [ ]  | **No** | [ ]  | **Yes (If yes, please explain below.)** |
|       |
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