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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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