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|  | STUDENT INFORMATION FORM CIP-2 |



**ATTACH A CURRENT RESUME. RETRUN 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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| **Current Class Year:** |  |  | **Expected Graduation Date:** |  |

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| **In two to four paragraphs, please describe your interests in the ILR field and your goals in participating in the Credit Internship Program.** |
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| **Please list with course number and title the courses you have taken so far at Cornell (and before if a transfer student) that you feel are relevant to your proposed internship.** |
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| **What preparation and experience do you believe you have that might contribute to the success of your proposed internship?** |
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| **What faculty members in the ILR School or elsewhere on campus might be contacted as a reference?** |
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| **Do you have an ILR Faculty member who has agreed to supervise your work as an intern off campus?** |
| **No**  **Yes (If yes, list faculty name, office address and phone number below.)** |
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| **ATTACH A CURRENT RESUME. RETRUN COMPLETED FORM TO BRIGID BEACHLER, MANAGING DIRECTOR, 119 IVES HALL.** | | |
| **I agree to have the information contained in this form and on the attached resume made available to possible internship sponsors.** | | |
| **Signature:** |  | |
| **PLEASE COMPLETE THE ONLINE APPLICATION AVAILABLE AT:** [**http://www.ilr.cornell.edu/creditinternships/forms**](http://www.ilr.cornell.edu/creditinternships/forms) | |