

Contact Information	
Name	
Street Address	
City ST ZIP Code	
Home Phone	
Cell Phone	
E-Mail Address	
Name of School (attending)	
Describe Status (circle one)	freshman, sophomore, junior, senior, post-grad (college only)
Availability	
Which internship session are you applying for?	
spring of summer of fall of winter of During which hours are you available for internship assignments? Weekday mornings Weekend mornings Weekday afternoons Weekend afternoons Weekday evenings Weekend evenings	
Interests	
Check which areas you are interested in learning about	
 Reporting Photography Graphic Design Marketing/Promotions Social Media Website Production Video Editing 	

Special Skills or Qualifications	
previous internships held or through	otions you have acquired from employment, volunteer work, other activities, including hobbies or sports. Specify any social what platform was used. Please attach any writing, photography application.
Previous Work, Volunteer or I	
Tell us where and when you had any description of your responsibilities.	previous work, volunteer experience. Also provide a brief
Describe why You are Interes	ted in Learning about the Media Industry
3	
A management and Circumstance	
Agreement and Signature	and the of the control of Control to the control of
	In that the facts set forth in it are true and complete. I understand by false statements, omissions, or other misrepresentations made in my immediate dismissal.
Name (printed)	
Signature	
Date	

Completed applications can be emailed to fbutcher@theexaminernews.com

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest in interning with us.