



PLACEMENT SITE - INTERNSHIP REQUEST

Dear Placement Site Manager:

Thank you for your desire to establish a Polk State College student internship at your organization. Please provide the information below to enable us to successfully assist you.

If you have any questions regarding this form, establishing an internship, or about Polk State College, please contact the Internship Director, at internships@polk.edu or 863.837.5960. For more information about Polk State College or our degree programs, please visit our website at polk.edu. We look forward to assisting you with a Polk State intern!

Organization Name:	<input type="text"/>	Contact's Name:	<input type="text"/>
Type of Business:	<input type="text"/>	Contact's Title:	<input type="text"/>
Address:	<input type="text"/>	Contact's Email:	<input type="text"/>
	<input type="text"/>	Contact's Phone:	<input type="text"/>
City/State/Zip:	<input type="text"/>		

Duration of Internship:

☐ 1 Semester ☐ On-going ☐ Potential Job

Desired Program of Study:

Is this a paid internship? ☐ Yes ☐ No

If so, wages/hour:

Date of Request:

Desired skill sets:

Necessary competencies:

Please list below the specific duties and/or projects to be assigned to the intern:

1. <input type="text"/>	5. <input type="text"/>
2. <input type="text"/>	6. <input type="text"/>
3. <input type="text"/>	7. <input type="text"/>
4. <input type="text"/>	8. <input type="text"/>

Semester/schedule (days/hours) of internship anticipated:

Is there any other information you would like us to know before we schedule student(s) to interview with you for this internship?

Thank you for your support of Polk State!