

## APPLICATION FOR LOCAL INTERNSHIP-RESEARCH PROGRAM

### APPLICANT INFORMATION

Name:		Are you a U.S. Citizen? YES NO	
Student PID:	Major:	Phone:	
Current address:			
City:	State:	ZIP Code:	
Year: JUNIOR SENIOR	Cumulative GPA:	Major GPA:	
UCSD e-mail address:			

### PAST INTERNSHIP/JOB EXPERIENCE?

Employer:			
Employer address:			How long?
Phone:	E-mail:	Fax:	
City:	State:	ZIP Code:	
Position:	Hourly Salary (Please circle)		
Employer:			
Address:			How long?
Phone:	E-mail:	Fax:	
City:	State:	ZIP Code:	
Position:	Hourly Salary (Please circle)		

### INTERNSHIP INTERESTS (Circle one of the following)

Research Oriented
Outreach Oriented

### DO YOU HAVE A VEHICLE THAT YOU COULD USE TO GET TO/FROM YOUR INTERNSHIP & ACTIVITIES?

YES NO
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**SIGNATURE OF APPLICANT:**