



# Internship Information Sheet

Please type or print neatly

## Student Info

First Name \_\_\_\_\_

Last Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Alt Phone \_\_\_\_\_

Email \_\_\_\_\_

DOB \_\_\_\_\_

## School Info

Name of School \_\_\_\_\_

Classification/Year \_\_\_\_\_

Major \_\_\_\_\_ Semester you want to intern for \_\_\_\_\_

Advisor name \_\_\_\_\_ Phone \_\_\_\_\_

This is a requirement for graduation YES  NO

What units do you want to work with at APD?

1<sup>st</sup> Choice \_\_\_\_\_

2<sup>nd</sup> Choice \_\_\_\_\_

3<sup>rd</sup> Choice \_\_\_\_\_

Hours Available to Work \_\_\_\_\_

In case of Emergency call:	Name/Phone
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For more information: Elizabeth Espy, 226 Peachtree St. SW Atlanta, GA 30303

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