Hodson Internship Application

No handwritten copies will be accepted.

Student Information

Name:	C	lass:
Phone:		mail:
		(Graduating seniors, please provide a non-SJC email address)
Will you be returning to the Annapolis campus	s next year? Yes	
Local Address (if not on campus):		
Permanent Address:		
U.S. Citizen? Yes No No Type of Visa	and Home Count	try (if not US citizen):
Awarded a Hodson or Ariel previously? Yes	No	
Internship Organization Info	rmation	
If you are applying to more than one establish each additional organization. All internships n		lease use this and the next page(s) to provide information for same career field.
You will only be awarded for an organizati	on that is listed	in your application.
Name of Organization:		
Field of Internship (i.e. publishing, law, educa	tion):	
Address:		
Mentor/Onsite supervisor:		Title:
Is your mentor a SJC alumna or alumnus? Ye	s No	
Phone:	Er	mail:
Does the organization offer a stipend? $\textbf{Yes} \square$	No If yes	s, the amount \$
Is the internship: Full-time Part-time		nip: Onsite Remote
Number of anticipated hours per week*:		I number of weeks:
Estimated start date:		
Total amount of stipend requested from the H	odson Internship	• Program \$
A full-time internship is \$4,000 (minimum of 320 he result in an adjustment of stipend; therefore, fi		0 hours is calculated at \$12.50/hr. * Changes in hours could f your internship as accurately as possible.
Has this internship been secured? Yes	lf no, by	what date will you know?
Recommenders		
List names and titles of two people who are s	upplying a recon	nmendation. One must be a St. John's tutor.
Name:	Title: <u>Tutor</u>	Organization: <u>St. John's College</u>
Name:	Title:	Organization:
Include with application:		<i>Complete application must be submitted by February 26, 2020 to:</i>
Letter of Interest addressed to Hodson Cor	nmittee	Kathleen Cady
	<i>.</i> .	Career Services Program Manager
□ Internship description plus Mentor's letter i	secured	St. John's College
Two recommendations (forms provided)		60 College Ave Annapolis, Maryland 21401
Unofficial Transcript		kathleen.cady@sjc.edu 410-626-2501

Date: _____

Student Signature: _____

Use this page for additional internships to which you've applied and have not yet been accepted and that are in the same career field. You may fill out information for as many additional established internships as needed.

You will only be awarded for an organization that is listed in your original application.

No handwritten copies will be accepted.

Internship Organization Information

Name of Organization:
Field of Internship (i.e. publishing, law, education):
Address:
Mentor/Onsite supervisor: Title:
Is your mentor a SJC alumna or alumnus? Yes No
Phone: Email:
Does the organization offer a stipend? Yes No If yes, the amount \$
Is the internship: Full-time Part-time Is the internship: Onsite Remote
Number of anticipated hours per week*: Total number of weeks:
Estimated start date: End date:
Total amount of stipend requested from the Hodson Internship Program \$
A full-time internship is \$4,000 (minimum of 320 hours), less than 320 hours is calculated at \$12.50/hr. *Changes in hours could result in an adjustment of stipend; therefore, fill out the hours of your internship as accurately as possible.
Has this internship been secured? Yes No If no, by what date will you know?

Internship Organization Information

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your mentor a SJC alumna or alumnus? Yes No
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