

SBTDC Intern Program Proposal Application

Contact Information

Company Name	
Contact Name	
Company City, County	
Company Phone Number	
E-Mail Address	

About the Company

Please write a short description of your company in the box

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How many employees do you have? (Please count FT as 1 and PT as 0.5	
What is your annual revenue?	
What year were you established?	
Do you have office or establishment where an intern can go every day?	

Internship Project

Please tell us in the box what project(s) the intern would be doing. The project(s) should be something that the Intern can do for 8 weeks for 40 hours per week (320 hours).

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Project Timeline

Please provide a weekly timeline to how the intern will spend their summer working on the project.

Learning Objective

Please summarize in the box what the intern would gain from this experience at your company (Please refer to the Learning Objective Document)

Intern Impact

Please summarize in the box how the internship projects would impact your business

Agreement and Signature

By submitting this application, I understand that the projects that the intern works on might evolve during the summer and that I will keep the SBTDC informed throughout the process. I understand my commitment to expose the student to a variety of learning experiences, require research and creativity at a level expected from an entry level employee, explain business concepts behind functions, and generally mentor to maximize the benefit to the student. I understand that the SBTDC is responsible for implementing the internship program, paying the student, and that the students must provide a weekly update to them. As a company, I understand that we are incurring a small fee that is paid to the SBTDC through direct payment or tax-deductible contribution. The SBTDC will visit with the intern and company throughout the summer to ensure that the project(s) is going well and provide mentoring support. I confirm that the company will provide a final appraisal of the intern and fill out a follow-up survey after the program is complete.

Name (printed)	
Signature	
Date	

Thank you for completing this application form and for your interest in working with the SBTDC and the Internship Program. Proposals are being reviewed and selected on a rolling basis, so please submit this as early as possible. The final deadline for submissions is December 15, 2016.