

**PROFESSIONAL CAREER INTERNSHIP APPLICATION
CENTURY CAREER CENTER**

Name _____

Address _____

Phone _____ Birth Date _____

Cell Phone _____ E-Mail address _____

Parent/Guardian _____

Guidance Counselor _____

Do you have transportation? _____

Please state your career objective: _____

What specific type of position(s) do you desire? (Please list in the order of your preference.)

What courses have you taken at Logansport High School or Century Career Center that would prepare you for this internship experience? _____

What job shadowing or field trips have you taken that have helped you to prepare for this internship experience? _____

Write a paragraph explaining how participating in this internship experience will benefit your career plans. (Continue writing on the back if you need more room.)

Six teacher recommendations are required. Disperse the attached recommendations among six of your present or previous LHS or CCC Teachers and have them return the forms Mrs. Frye.

Name _____

Internship Application

As an intern, you are about to begin an educational experience that will be a significant milestone in the preparation of a satisfying and successful career. Your first responsibility is to read the guidelines and complete the attached application.

Application Guidelines:

1. If you are able to answer YES to ALL of the following questions, please continue. If not, you do not qualify for the program and will need to show improvements in those areas before applying.

- a. Are you currently on track for graduation? Yes ____ No ____
- b. Will you complete Core 40 classes by the end of your senior year? Yes ____ No ____
- c. Is your attendance rate at 93 (no more than 6 absences last semester) or higher this past semester/trimester? Yes ____ No ____
- d. Are you maintaining a GPA of 3.00 or better? Yes ____ No ____
- e. Is your discipline record clear of any referrals? If not, how many referrals have you had? ____ Yes ____ No ____
- f. Are there six school personnel who would give you an outstanding recommendation? Yes ____ No ____
- g. Do you have transportation to an internship site? Yes ____ No ____
- h. Is this application for an internship in accordance with your "meaningful future plan?" Yes ____ No ____

2. When completing the application, please print using blue or black ink.
3. Complete the Internship Application and return it to the Internship Coordinator, Mrs. Frye, in Room H121 at Century Career Center.

TEACHER RECOMMENDATION
Professional Career Internship Century
Career Center

TO: (TEACHER'S NAME): _____

FROM: Cynthi Frye

DATE: _____

_____ is now, or has been, a student in your class and has expressed an interest in participating in the school's internship program. If selected, this student will be representing our school in the community. Would you be kind enough to evaluate this student's ability to fulfill that role by completing this evaluation form? Please fill it out and return it to Cynthi Frye in Room H121 at CCC. Please fill it out **honestly** and add any comments that will help me in the placement process. Thank you for your assistance.

TRAITS	1	2	3	Comments
Attendance/Punctuality				
Dependability				
Appearance				
Attitude				
Leadership				
Work Habits				

Rating Scale: 1 = Above Average 2 = Average 3 = Below Average

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