

# IST 668 General Internship Application Form

COLLEGE OF ENGINEERING & APPLIED SCIENCES, UNIVERSITY AT ALBANY, STATE UNIVERSITY OF NEW YORK

Applying for: ☐ One Internship Placement for 3 credits (150 hours)

Semester: \_\_\_\_\_

OR

☐ Two Internship Placements for 6 credits (300 hours total)

## Personal Information:

|                 |  |            |            |  |     |
|-----------------|--|------------|------------|--|-----|
| First Name      |  | Last Name  |            |  |     |
| Email           |  |            | Student ID |  |     |
| Contact Address |  |            |            |  |     |
| City            |  |            | State      |  | Zip |
| Home Phone      |  | Work Phone |            |  |     |

## Educational Background:

|                                                               |  |                                 |  |
|---------------------------------------------------------------|--|---------------------------------|--|
| BA/BS Major                                                   |  |                                 |  |
| Previous graduate degree and subject (other than MLS or MSIS) |  |                                 |  |
| MSIS Concentration                                            |  |                                 |  |
| Semester Admitted                                             |  | When do you expect to graduate? |  |

## Your Internship Placement Preferences:

What geographic area do you prefer?

☐ Capital District (Albany, Schenectady, Troy)

☐ Other: \_\_\_\_\_

Do you have a car? ☐ Yes ☐ No

Please mark with 1, 2, or 3 your first, second, and third choice for the type of library or information center you prefer to be placed in:

☐ Public

☐ Academic

☐ Corporate

☐ Law/Medical

☐ Archives/Records

☐ Science

☐ Museum

☐ Technology Services

☐ Government

Please describe briefly your specific areas of interest:

|  |
|--|
|  |
|--|

You may suggest internship sites. Please provide the contact information below.

| Internship Site | Contact Person | Phone # and/or Email |
|-----------------|----------------|----------------------|
|                 |                |                      |
|                 |                |                      |
|                 |                |                      |

You must have 24 credits completed before the start of the internship semester. Please verify this by listing the courses you have completed. Also, list the courses you will be taking concurrently with your internship.

| Course Name                                | Course Number | Semester | Grade |
|--------------------------------------------|---------------|----------|-------|
| <b>Courses completed before internship</b> |               |          |       |
|                                            |               |          |       |
|                                            |               |          |       |
|                                            |               |          |       |
|                                            |               |          |       |
|                                            |               |          |       |
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|                                            |               |          |       |
|                                            |               |          |       |
|                                            |               |          |       |
|                                            |               |          |       |
|                                            |               |          |       |
| <b>Courses concurrent with internship</b>  |               |          |       |
|                                            |               |          |       |
|                                            |               |          |       |
|                                            |               |          |       |
|                                            |               |          |       |
|                                            |               |          |       |

Please print this application, sign, ask your faculty advisor to review and sign, attach your resume, and submit to the Department of Information Science, Draper 113, 135 Western Avenue, Albany, NY 12222.

Student Signature: \_\_\_\_\_

Faculty Advisor's Suggestions/Signature:

Print the Completed Form

Reset