

2009 Student Internship Program

Student Application

Student Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Email: _____

Date of Birth: _____ High School: _____

Grade finishing Spring 2009: _____ Do you have a car? _____ Yes _____ No

Have you taken printing-related classes at your high school? _____ Yes _____ No

Have you used Apple MacIntosh computers? _____ Yes _____ No

What software do you use? _____

Briefly describe your prior work experience:

What are your plans after high school graduation?

Briefly describe your involvement in high school activities, hobbies and/or volunteer work.

Do you have relatives who currently work in a print-related company? _____ Yes _____ No

What would you like to learn from your internship experience?

References:

Please list two references that are not related to you.

1. Name: _____

Title/Company/School, etc: _____

Phone: _____ Email: _____

2. Name: _____

Title/Company/School, etc: _____

Phone: _____ Email: _____

Thank you for your interest in the 2008 Student Internship Program. This application will be considered by members of the Printing Industry of Minnesota, Inc. that will be hiring summer interns through this program.

Please submit this form to:

**Kris Davis
Printing Industry of Minnesota, Inc.
Rosedale Towers
1700 Highway 36 W, Suite 510
Roseville, MN 55113**

Phone: **651.789.5508**

Fax: **651.789.5520**

Email: **kristinp@pimn.org**