



JSDC Internship Reimbursement Program Application Fall 2024

Application Deadline: August 30, 2024

Submit application to Info@growingjamestown.com / jamie@growingjamestown.com

Student Name _____

University/College Name _____

Major Field of Study _____

Student's Semester/Year _____

Full-time Student: Yes No

Internship Position Title _____

Work Site Name/Address _____

Supervisor Position Title _____

Supervisor's Name _____

Supervisor's Email _____

Internship Hours/Schedule _____

Expected Attire _____

How did you find the intern? (Did you post the position, match with a school, or other?)

Is there currently a position within the company (within our community) available that the intern could advance to post graduation?

Have you Discussed Workplace Policies? Yes No

Job Description

Learning and Work Goals. (what can the intern expect to learn from this experience and how does the position align with their major/program?)

Hourly Wage_____

Estimated Internship Hours Per Week_____

Total Anticipated Payroll Cost_____

Anticipated Start Date_____

Anticipated End Date_____

Student Name

Student Signature

Date

Academic Advisor Name

Academic Advisor Signature

Date

Internship Supervisor Name

Internship Supervisor Signature

Date
