

JSDC Internship Reimbursement Program Application Application Deadline: April 27, 2022

 $Submit\ application\ to\ \underline{Info@growingjamestown.com}$

Student Name			
University/College Name			
Major Field of Study			
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			
Have you Discussed Workplace	Policies? Yes 🗆 N	lo 🗆	
Job Description			

Hourly Wage		
Estimated Internship Hours Per Week		
Total Anticipated Payroll Cost		
Anticipated Start Date		
Anticipated End Date		
Student Name	Internship Supervisor Name	
Student Signature	Internship Supervisor Signature	
Date	Date	
Academic Advisor Name	_	
Academic Advisor Signature	_	
Date	_	
	_	

<u>Learning and Work Goals.</u> (what can the intern expect to learn from this experience)