

## DES Internship Interest Form

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Agency/Organization: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

### Please complete the following.

1. What is the primary mission of your organization?
2. What are the expected duties of the proposed internship?
3. When do you need an intern? What is the duration?
4. Where will the internship take place?
5. Is there any type of compensation available (e.g., salary, stipend, housing)?
6. If possible, please provide a job description.

**Please mail or fax this form to:**

DES Internship Coordinator  
106 Bailey Hall  
University of Southern Maine  
Gorham, ME 04038  
Fax: 207.780.5251