



# Undergraduate Student Internship Application

## BSAD 300 - Business Internship-Elective Credit

<b>Student/Intern's Name</b>		<b>Student ID</b>		<b>Date</b>	
<b>Student/Intern's Phone #</b>			<b>Loyola E-mail Address</b>		
<b>Name of Organization Sponsoring Internship</b>			<b>Name &amp; Title of Immediate Supervisor</b>		
<b>Internship Position/Title</b>			<b>Rate of Pay</b>		
<b>Start &amp; End Dates</b>		<b># Hours Working/Week</b>		<b># Credit Hours Desired (1 – 3)</b>	
<b>Address of Organization</b>		<b>City</b>	<b>State</b>	<b>Zip</b>	<b>Telephone # of Organization</b>

**Academic Major(s) and/or Minor(s) in the School of Business:**

**Internship Semester:**

**Please attach a job description or write it here:**

**Please return this completed form via email or mail to:**

**ATTN: Aminatu Rubango**

Loyola University Chicago • Schreiber Center, Room 119 • 16 E. Pearson St., Chicago, IL 60611

312-915-7907

nrubango@luc.edu