HOST COMPANY INTERNSHIP DESCRIPTION FORM

Please Email (weissman.internships@baruch.cuny.edu) or fax (646-312-2071) this form to the Internship Placement Program of the Weissman Center for International Business.

CONTACT INFORMATION:

Company Name:	
Address:	Street: Floor/Suite: City/State/Zip:
Contact Person:	
Department:	
Telephone:	
Fax #:	
E-Mail:	
Website:	
How to send résumés?	❒ Fax ❒ Email
Do you want the Internship Coordinator to schedule the interviews?	❒ Yes ❒ No

INTERNSHIP DESCRIPTION:

Start Date:		**End Date:**	

❒ Paid Stipend Amount: Hourly Rate:	**❒ Unpaid**
Academic Credit: ❒ Required ❒ Optional	

Hours Per Week (Unpaid: Average 10-20):	

Internship Title:	

Description of Tasks/Projects:
1.
2.
3.
4.
5.
6.

Number of Openings:	

Office Location of Internship:	

CANDIDATE QUALIFICATIONS/REQUIREMENTS:

Class Status (Undergraduate/Graduate):	

Major/Minor or Specialization:	

Minimum GPA:	

Skills Needed:	***Technical:***
	Language:
	Type of Experience:

For Office Use Only:

Internship Coordinator Assigned: _____ Date Company Contacted: _____