



Cambridge Internship Program Application

1. Business Information

Business Name: _____

Address: _____

City/State/Zip: _____

Contact Person: _____ Title: _____

Telephone Number: _____ Fax: _____

Email Address: _____ Tax ID: _____

2. Employment

An internship position, for the purpose of this application, is a position which required a student enrolled in high school or college and have paid at least minimum wage 240 hours.

A. Number of current employees: _____

a. Full-time _____ b. Part-time _____ c. Company wide _____

B. Highest number of intern positions held at any one time during the full year prior to the date of application: _____

3. Short narrative or link to company background (website):



4. Internship Description

Please provide the following information for the potential internship:

1. Job Title _____

Location of Internship: _____

Occupation: _____

Projected average number of hours worked per week: _____

Starting wage per hour: _____

Internship Duration: _____

Approximate start date: _____

Job Description: _____

I certify that all information is accurate and correct and that I will follow guidelines of program.

Signature: _____ Date: _____

Completed By:

Name: _____

Phone Number: _____

Email Address: _____