Cambridge Intern Program Completion Form

In order to document that a student has completed an internship, all businesses awarded Cambridge Intern Program funds are requested to submit this internship completion form, W-9, and proof of payment/hours worked to the Cambridge Economic Development Director. Forms must be submitted within 30 days post internship. Once documentation is received grant funds will be distributed.

Business Information Name of Business: Business Address: City/State/Zip: Signature:_____ Date:_____ Student Information Name of Student: Student Address: City/State/Zip: **Internship Information** Title of Internship Position:______ Start Date: Total Hours Worked: Number of Weeks employed:_____ Wage per hour: \$______ Was the student employed following the completion of the internship? Yes or No **Does the business plan to retain this internship position?** Yes or No Please elaborate: Describe the outcomes and impacts of participating the Cambridge Internship Program: