



Radio Bloomington Internship Application

Please print all information.

Date: _____

Personal Information

Last Name: _____ First Name: _____

Address: _____ City/State/Zip: _____

Phone Number: (____) _____ - _____ Email: _____

Education Information

College/University Currently Enrolled: _____

Major/Area of Study (include minors and/or concentrations): _____

Department(s) Interested In (circle): Promotions Sales Programming Production

Graduation Year: _____ Semester to Intern (circle one): Spring Fall Summer

Start Date of Internship: _____ End Date of Internship: _____

How many hours and what days are you available to come in and work?

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Time(s) Available							

Do you need this internship for credit? (Circle one): Yes No

Are you able to work through the Grant Program to be paid? (Circle one): Yes No

What are you looking to gain from this internship? _____

Radio Experience

Have you interned/worked at a Radio Station before? (Circle one) Yes No

If yes, when, where, and what were your responsibilities? _____

Please include your cover letter and resume with this application.