

# EMPORIA STATE UNIVERSITY

## Employer Statement of Interest for the Career Services Internship Program

Thank you for your interest in participating in the Career Services Internship Program at Emporia State University. Internships offer a variety of benefits to both the intern as well as the participating organization. In order to make the best match between intern and work site, we request that you complete the information below.

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Organization Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

E-mail: \_\_\_\_\_

Phone: \_\_\_\_\_ Title: \_\_\_\_\_

Number of Hours a week you can host an intern \_\_\_\_\_

Please indicate the types of projects you can offer an intern(s):

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Needs assessment            | <input type="checkbox"/> Statistical Analysis  | <input type="checkbox"/> Exposure to Organization |
| <input type="checkbox"/> Marketing/Consumer Research | <input type="checkbox"/> Client Files/Accounts | <input type="checkbox"/> Community Outreach       |
| <input type="checkbox"/> Conducting focus groups     | <input type="checkbox"/> Gathering Data        | <input type="checkbox"/> Staffing Assistance      |

Other \_\_\_\_\_

How many interns can you host per academic semester? \_\_\_\_\_

Level of experience requested:     None     Sophomore-Junior     Junior-Senior

Benefits offered to Student (check all that apply):

Stipend     Professional Membership(s)     Specialized Training     Other \_\_\_\_\_

Who will supervise the internship(s)? NAME \_\_\_\_\_ TITLE \_\_\_\_\_

*Please return this completed form to David Milford, Career Services, 1 Kellogg Circle, Campus Box 4014, Emporia, KS 66801 or fax it to 620-341-5159.*