

Science & Healthcare Internship Program

Spring 2023 Application

Name _____ CBU ID _____ Graduation Year _____

Preferred First Name _____ CBU Email _____ Phone _____

Major _____ Overall GPA _____ Minor _____
(optional)

Do you have your own car or access to private transportation (not including public transportation)? Yes No

What are your tentative career goals/interests? _____

For Spring 2023, please list your internship site preferences below (this can be obtained from the Career Services list of Academic Internship sites and/or an UNPAID internship that you have already secured):

1. _____

2. _____

3. _____

Please briefly answer these questions in the spaces provided below.

Tell us why you are interested in the SHIP Program. Also, please identify your interest in working in a science/healthcare setting in Memphis – explain why you would be a good fit for this program.

List previous healthcare/science related experiences you have completed thus far (shadows, volunteer work, etc.).

If selected for the SHIP Program, what type of work would you find both personally rewarding and experientially beneficial?

I have read the requirements of participating in the Science & Healthcare Internship Program (SHIP) and agree to participate to the fullest extent.

Applicant's Signature _____ Date _____

**This application is due by 4:30 pm on Friday, December 16, 2022.
Deliver in person to Amy Ware in Buckman 207 or email to aware1@cbu.edu.**

Staff Use ONLY	Date Received: _____	Accepted: Yes ___ No ___
Notes:		