



*A Gypsy Life...
Productions
Carter-Tates Enterprises, Inc.*

Internship Application

NAME: _____ TODAY'S DATE: _____

PHONES: (HOME) _____ (CELL) _____

EMAIL: _____

ADDRESS1: _____

ADDRESS2: _____

CITY

STATE

ZIP

PERMANENT ADDRESS 1: _____

PERMANENT ADDRESS 2: _____

CITY

STATE

ZIP

EMPLOYED AT: _____

PHONE: _____

MANAGER / SUPERVISOR: _____

JOB DUTIES: _____

HOURS PER WEEK / SCHEDULE: _____

SCHOOL: _____

YEAR: (circle one) FR SO JR SR GRD GRADUATION DATE: _____

MAJOR: _____

If accepted will you receive school credit for participating in this Internship? YES NO

SPONSORING PROFESSOR / TEACHER: _____

PHONE: _____

AREA OF INTEREST AND WHY: _____

