

**HISTORY DEPARTMENT
COLLEGE OF CHARLESTON
SPONSORING ORGANIZATION'S APPLICATION FOR AN INTERN**

Name of Organization: _____

Address: _____

Telephone/Fax/E-mail/website: _____

Name of Organization Intern Supervisor: _____

Internship Job Title: _____

Application Deadline: _____

Term(s) applying for: Fall Spring Summer

Description of Responsibilities (Attach additional information as needed):

Knowledge and Skills Required:

Dates of Internship and Hours of Work (Internships require 120 hours of student work for 3 hours academic credit) If this internship includes an honorarium or hourly wage, please indicate the amount.

I have reviewed the description of responsibilities of organization sponsors and agree to participate as described:

Signature _____ Date _____