



## INTERN REQUEST APPLICATION

**Application Deadline: April 1, 2024; July 31, 2024; November 30, 2024**

Company Name \_\_\_\_\_

Chapter Member Name \_\_\_\_\_ Designation(s) \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

Location of Internship - City \_\_\_\_\_ State \_\_\_\_\_

Anticipated Intern Responsibilities / Duties \_\_\_\_\_

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Proposed Compensation \$ \_\_\_\_\_ per hour Total Hours per Week \_\_\_\_\_

Amount of Travel Required \_\_\_\_\_ hours per week

Date Internship Available \_\_\_\_\_

Requested Last Day of Internship \_\_\_\_\_

Name of Intern Requested\* \_\_\_\_\_

***\*Companies do not need to have an intern designated to apply***

By signing below, I and my company agree that we have read and understood the California ASFMRA Chapter's Internship Guidelines Requirements on [calasfmra.com](http://calasfmra.com) and will abide by the criteria outlined in that document.

**SIGNATURE**

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**Please return completed form to:**

Curtis Buono  
Scholarship Committee Chair

(760) 521-2501  
[curtis@peoplescompany.com](mailto:curtis@peoplescompany.com)