

REQUEST FOR AN INTERNSHIP
(Please type)

**Department of Agricultural Economics and Agribusiness
Louisiana State University and A&M College
Baton Rouge, Louisiana 70803-5604**

Name

Firm or agency preference:

Local address and phone number:

1.

2.

Kind of work preference:

Permanent address & phone number:

1.

2.

Location preference:

1.

Overall LSU GPA:

2.

Circle your classification

Circle your semester preference

SOPH JUNIOR SENIOR

Summer Fall Spring

Circle whether you are

Expected graduation date:

Major Minor

Hours Earned at LSU:

Honors, awards, Dean's list, scholarships, extracurricular activities:

Previous work experience:

Career objectives:

ATTACH ONE COPY OF YOUR CURRENT LSU TRANSCRIPT WITH THIS FORM.

I hereby authorize the release of the information provided above to firms or agencies interested in participating in the Internship Program.

Signature of Student

Date

Signature of Department Faculty Advisor

Date

