

MANN CHILD POLICY INTERNSHIP APPLICATION

Date of Application: ___/___/___

Last Name: _____ First Name: _____ Middle Initial: ___

E-mail Address: _____ Student ID #: _ _ _ _ _

Major: _____ Major GPA: _____ Overall GPA: _____

Minor(s): _____ Number of credit hours completed: _____
(including this semester)

Expected Date of Graduation: ___/___/___
Month Year