



# CENTER FOR CAREER DEVELOPMENT

## PROFESSIONAL INTERNSHIP PROGRAM APPLICATION FORM

Recommendations may also be  
submitted via e-mail to:  
[career@cooper.edu](mailto:career@cooper.edu)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: (     )     -     E-mail: \_\_\_\_\_

Expected Graduation Date:     /     /

**Please list your most recent work experience for first.  
include dates and locations whenever Possible.**

Work Experience (please list the most recent position first) or attach a resume

\_\_\_\_\_  
\_\_\_\_\_

Skills: \_\_\_\_\_

\_\_\_\_\_

Areas of Interest: \_\_\_\_\_

\_\_\_\_\_

What do you expect from an internship? \_\_\_\_\_

\_\_\_\_\_

Two faculty recommendations are required. Please list faculty members below:

\_\_\_\_\_

\_\_\_\_\_

Date:     /     /

*Two faculty recommendations must be submitted to the Center for Career Development. Without them the application will not be considered. Please return this form to the Center for Career Development, 29 Third Avenue, 4th Floor, New York, NY 10003*