



Internship Application Form

Internship Applying for:

Name of Program: _____

Personal Information:

Name: _____ SS#: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-Mail: _____

Dates of Availability: From _____ To _____

Days and Time of Availability: Mon _____ Tue _____ Wed _____

Thu _____ Fri _____ Sat _____ Sun _____

Do you want to earn credit for your internship? _____ Yes _____ No

Please List Two References:

Reference #1

Name: _____

Profession: _____

Address: _____

Phone Number: _____

Reference #2

Name: _____

Profession: _____

Address: _____

Phone Number: _____

Please describe your experience as it applies to the internship program you are interested in applying for:

Education (list specific courses):

Productions (your roles and responsibilities):

Studio and Field Equipment (list equipment and your level of proficiency):

Editing Equipment (list hardware/software and your level of proficiency):

Other pertinent experience and skills of interest:

Please Answer the Following Questions:

What are your expectations from the internship?

How can you contribute to BITV?

What are your required time commitments to fulfill college requirements (if any)?