Women, Gender, and Sexuality Studies
Internship Award Proposal Form

Name: ____________________________ Class Year____________________

Local Address: ________________________ Local Phone #: ______________

Home Address: ___________________________________________________

Email Address:____________________________________________________

Major: ______________________________ Minor:_______________________

Have you received internship grant funding in the past:
_______________________________________________________________

If yes, indicate the semester and name of the internship fund:
_______________________________________________________________

Description of Proposed Internship:
(Please attach an additional sheet addressing the following)

Name of the organization and address
How did you hear about this opportunity?
Does this organization offer paid internships/stipends?
Number of hours per week you will spend doing the internship.
Number of hours you will work.
Proposed start/end dates.
Do you receive financial aid from Washington University?

References – Name and contact information
(The individual providing the reference may not be the internship supervisor.)

In addition, please attach to this form the following:

1) An unofficial copy of your academic transcript.
2) An essay of no more than 2 pages that:
   a. Discusses the proposed internship, including your roles and responsibilities within the organization and the nature of the supervision you will be receiving.
   b. Discusses why you would like to do this internship, including what you hope to learn from this experience and how the internship relates to your academic studies and career goals. You can also include mention of
the skills, knowledge, and experiences you bring to the internship.
c. Include any information you wish to provide about financial need.

A representative from the organization with which you plan to perform your internship must fill out and sign the acknowledgement below:

Organization: ________________________________________________________________

Name and Title of Representative: ____________________________________________

I hereby acknowledge that __________________________ has been selected to intern with our organization from: ______________ to________________

Signature of Representative: ________________________________________________

Will the representative signing this form serve as the internship supervisor? _____

Deadline for submission for the summer internship is March 1st. Completed proposals with all required material should be submitted to the Women, Gender, and Sexuality Studies office in McMillan Hall, Room 210.