

INTERNSHIP GRANT AWARD APPLICATION 2016-17

Thank you for your interest in applying for funding from the Internship Grant Award for an unpaid or underpaid Interim or Summer internship.

In order to complete this form you will be asked to include information obtained from the GRANT AWARD BUDGET WORKSHEET. You can also review the questions contained in this application by reviewing the GRANT AWARD APPLICATION WORKSHEET.

The Grant Award Budget Worksheet and Grant Award Application Worksheet, as well as additional information about the funding opportunity can be found on the following website under "Application Process and Required Documents":

<http://wp.stolaf.edu/pipercenter/?p=2836>

Your application will be considered complete after you finish this form and deliver hard copies of the following documents (as a stapled packet) to the front desk of the Piper Center by 4:30pm on the deadline:

1. Confirmation Letter or Email
2. Grant Award Budget Worksheet
3. Written Statement Form
4. Resume

You may return to this document to add or edit information as necessary. Be sure to save the "Edit your response" link after you submit your changes!! Whatever you have submitted at 4:30pm on the application deadline will be saved as your application.

Your email address will be recorded when you submit this form.

*** Required**

1. Last Name *

2. First Name *

3. Student ID Number: *

4. Complete Email Address *

(including "[@stolaf.edu](mailto:stolaf.edu)")

5. Term *

(when the internship will the internship take place)

Mark only one oval.

☐

Interim

☐

Summer

6. Year *

(when the internship will take place)

Mark only one oval.☐ 2017☐ 2018**7. Major (1st) ***

8. Major (2nd, if you have one)

9. Concentration (1st, if you have one)

10. Concentration (2nd, if you have one)

11. Class Year **Mark only one oval.*☐ 2017 (eligible to apply only for interim 2017)☐ 2018☐ 2019☐ 2020**12. Are you an international student? ****Mark only one oval.*☐ Yes☐ No**13. If yes, please indicate country of residence.**

14. Have you received any type internship funding from the Piper Center in the past? *

Students who previously received an internship grant award from the Piper Center are not eligible for a second award. Students who have previously only received funding through the Johnson Family Opportunity Fund are eligible. Students who have received funding through a cohort internship program, Public Affairs Award, M.A. Cargill Award, LUCE Grant, etc. are eligible, but if there is overwhelming demand for funds priority will be to provide funding to those that have not received any internship funding in the past. If you are not sure if you have received the award, please email <piper.center> to check.

Mark only one oval.

- ☐ No - I have not received any internship funding through the Piper Center
- ☐ Yes - I previously received the Internship Grant Award (please do not proceed with your application)
- ☐ Yes - I have previously received Johnson Opportunity Fund (still eligible)
- ☐ Yes - I received funding through a cohort internship program, Public Affairs Award, LUCE funding, MA Cargill, etc.) (If yes, please answer the next question as well)

15. Additional information about previous internship funding

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16. Will you register for academic credit through St. Olaf for this experience? *

Please note that the deadlines and process for the registering for an academic internship can be found here: <http://wp.stolaf.edu/pipercenter/getting-academic-credit-for-an-internship/>

Mark only one oval.

- ☐ Yes
- ☐ No
- ☐ Have not decided yet

17. Faculty Reference *

Please provide the name and contact information for one St. Olaf professor we could contact. You must confirm your professor's willingness to be your reference prior to listing that person here.

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BUDGET INFORMATION

18. Total Expenses *

Please enter the dollar amount from Line (A) of the Grant Award Budget Worksheet.

.....

19. Total Financial Support *

Please enter the dollar amount from Line (B) of the Grant Award Budget Worksheet.

.....

20. Total Financial Need (to cover expenses) *

Please enter the dollar amount from Line (C) of the Grant Award Budget Worksheet.

.....

INTERNSHIP INFORMATION (primary internship)

Students have the option of combining multiple internship experiences to fulfill the grant award requirements. Please complete this section with information about your primary internship experience. At the end of the section you will have the option to add another (secondary) internship experience.

21. Internship Organization/Employer *

.....

22. Position Title *

e.g., Business Analyst, Outreach Coordinator

.....

23. Position Description *

Please provide a two- or three-sentence summary of your primary duties and responsibilities of your internship position.

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24. Website *

Please include the web link for the organization, if one exists.

.....

25. Employer Street Address *

.....

26. City *

.....

27. **State ***

.....

28. **If internship is outside the U.S., please list country.**

Please note that internships in counties with a State Department travel warning are generally not eligible for funding. Email <pipecenter> at least three weeks before the deadline if you would like to apply for special permission to travel to a country with a travel warning.

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29. **Supervisor's First Name ***

.....

30. **Supervisor's Last Name ***

.....

31. **Supervisor's Title ***

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32. **Supervisor's Email Address ***

.....

33. **Supervisor's Phone Number ***

.....

34. **Internship Start Date ***

.....
Example: December 15, 2012

35. **Internship End Date ***

.....
Example: December 15, 2012

36. **Number of Weeks (primary internship) ***

.....

37. **Number of Hours Per Week (primary internship) ***

.....

38. **Total Hours (primary internship) ***

.....

39. Which of the following best describes the industry area of your primary internship? (select one or two categories) *

Check all that apply.

- ☐ Arts Management
- ☐ Business (Consulting, Finance, Management)
- ☐ Education
- ☐ Engineering
- ☐ Entrepreneurship
- ☐ Environmental
- ☐ Government & Public Policy
- ☐ Healthcare & Medicine
- ☐ Legal Professions
- ☐ Media & Communications
- ☐ Ministry & Religiously Affiliated
- ☐ Music, Theater, Dance & Performing Arts
- ☐ Nonprofit & Social Services
- ☐ Sales & Marketing
- ☐ Science & Lab Research
- ☐ Sports Management & Recreation
- ☐ Technology
- ☐ Other: _____

40. Will you also be completing another (secondary) internship position? *

Mark only one oval.

- ☐ No *Skip to "Final Steps."*
- ☐ Yes *Skip to question 41.*

INTERNSHIP INFORMATION (secondary position)

41. Internship Organization/Employer (2nd)

42. Position Title (2nd)

e.g., Business Analyst, Outreach Coordinator

43. Position Description (2nd)

Please provide a two- or three-sentence summary of your primary duties and responsibilities of your internship position.

44. Website (2nd)

Please include the web link for the organization, if one exists.

45. Employer Street Address (2nd)

46. City (2nd)

47. State (2nd)

48. If internship is outside the U.S., please list country. (2nd)

Please note that travel to countries with a State Department travel warning are generally not eligible to apply for internship funding. Email <pipecenter> at least three weeks before the deadline if you would like to apply for special permission to travel to a country with a travel warning.

49. Supervisor's First Name (2nd)

50. Supervisor's Last Name (2nd)

51. Supervisor's Title (2nd)

52. Supervisor's Email Address (2nd)

53. Supervisor's Phone Number (2nd)

54. Internship Start Date (2nd)

*Example: December 15, 2012***55. Internship End Date (2nd)**

*Example: December 15, 2012***56. Number of Weeks (2nd)**

57. Number of Hours Per Week (2nd)

58. Total Hours (2nd)

59. If you have any additional internship experiences (besides primary and secondary internships), please describe the role, employer, start and end date and total hours.

60. Total Internship Hours (primary, secondary and other positions)

Final Steps

FINAL STEPS

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☐ Send me a copy of my responses.

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