



The Internship Program
Kinesiology Department
8000 York Road
Towson, MD 21252

INTERNSHIP DESCRIPTION FORM

Please type or print legibly.

Job Target Title _____ Date: _____

Type of Industry _____ Web Address: _____

Organization _____

Street Address _____

City, State, Zip _____

Telephone _____ Fax _____ E-mail _____

Contact Person _____ Title _____

Please list three to five major responsibilities/Projects.
(Up to 20% of the interns' responsibilities can be administrative/clerical in nature.)

Minimum qualifications _____

Compensation _____

Hours/days _____

Internship available in Fall Minimester Spring Summer

Number of intern positions available: _____

Please complete one form for each internship position.

Signature _____

This employer is an equal opportunity employer in compliance with all EEO guidelines and legislation.

For Office use only

Position Title	Job #
Program Coordinator	Employer #