

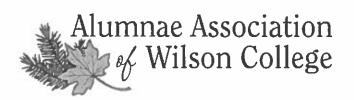
Alumnae Association Internship Gift

Statement of Intention:

The Alumnae Association Internship Gift is awarded to students seeking supplemental funds to complete a desired and confirmed internship experience. Gifts come from restricted donations to the Alumnae Association and are not intended to be the sole source of income of which the internship requires. Available funding fluctuates year to year based on donations. Funds are not meant to support tuition fees. Students are expected to supply a budget that shows expenses above and beyond basic daily living.

Criteria for application:

- Only matriculated Wilson College students may apply for an Alumnae Association Internship Gift. The goal is to support students to be successful and graduate from Wilson with entry level career experiences.
- Gifts are available year-round, for internships completed in the fall, spring, summer, or Jterm semesters.
- A minimum cumulative GPA of 3.0 is required.
- Preference will be given to students with the most seniority at the College and who have not previously received an Alumnae Association Internship Gift.
- An application and projected expenses form must be completed. In addition, a letter of recommendation from the faculty advisor of the internship must be included in application packet.
- Incomplete applications will not be considered for review. Applicants must allow at least six weeks between application submission and date of proposed internship to begin. This is an indication to the committee of a student's planning and preparation. Emergency circumstances of a shorter time frame may be explained by the student in the application and considered at the discretion of the committee.
- In general, the maximum allotment will not exceed \$500 per student applicant. However, students with outstanding opportunities are welcome and encouraged to submit their proposal for consideration. Funding will be awarded at the discretion of the Student Connections Committee of the Alumnae Association.
- If a recipient decides to pursue a new or different internship than previously approved by the Student Connections Committee, the recipient must inform the Office of Alumni Relations immediately, and re-apply for approval. Funds are not transferrable, and may be required to be returned in full or part upon reapplication.
- Upon completion of the internship (no later than six weeks following), recipients will submit a written summary report of her/his internship experience to the Office of Alumni Relations. The report shall include details of the general experience, what was learned and how the opportunity of the experience may affect future life plans. Pictures are appreciated. Recipients may be asked to speak at a future Alumnae Association meeting/event about their internship.



Application for Wilson College Alumnae Association Internship Gift

Date submitted

STUDENT'S GENERAL IN	IFORMATION:		
Last name	First name	Grad Year	
Home address	City State	Zip Code	
College address	Best phone # to reach you	Email address	
Major(s)			
Minor(s) INTERNSHIP INFORMAT	TION:	Cumulative GPA	
	Fall Spring Summer J-Term		
Internship Dates: From:			
Previously Applied for Gift?	Yes or No (circle one)	(circle one)	
Internship Location Name &	& Full Address:		
Internship Supervisor:		Phone number:	
Wilson College Faculty Adv	Phone number:		
Is this Internship Paid? Yes	or No (Circle one) If so, how	much? \$	
How many hours per day or	week will be worked?		
Total expected expense \$ (Do not include costs associated)	ed with course registration)		
Amount Requested from Ale (Details on attached finance for	umnae Association \$	_	

On an attached sheet of paper provide the following information

- 1. Elaborate on the project or internship and what you will be doing.
- 2. Describe the relevance of this project to your course of study and/or anticipated career.
- 3. List any prerequisites or work you have undertaken in preparation for this experience.
- 4. A letter of recommendation from your faculty advisor must be included with application.

I understand the terms of this application. I promise to submit a summary report as requested and use any granted funds ONLY for the purpose outlined in this application. Any unused funds will be returned to the Alumnae Association.

If I am selected as a gift recipient, I grant to the Alumnae Association of Wilson College and Wilson College (those acting on behalf) permission to publish my name and internship listing and all or part of my internship summary for promotion of alumnae/i, student and college marketing. Yes or No (Circle one) Initial here				
Printed Name				
Signature				
Date				
Return to:				
Alumni Relations Office				

(updated: January 2019)

Wilson College ARoffice@wilson.edu

717-262-2010

WILSON COLLEGE STUDENT INTERNSHIP PROJECTED EXPENSES

Name:	Cla	ass Year: Dates of Inte	rnship:		
Projected Expenses	Explanation		Total		
Transportation					
\$0.35/mi.Auto Miles					
Housing	Amount Per Week/Month x Number of Weeks/Months of Internship				
	Are you using on-campus housing? Yes or No (circle one) If so, are meals provided as part of your housing? Yes or No				
Meals	# meals: # o	iays: @ average \$	per		
Miscellaneous					
*NOTE: ONLY COMPLETE APPLICATIONS WILL BE CONSIDERED					
Applicant Signature					
Faculty Advisor Signature		For office use only: Amount of gift awarded by Alumnae Association	Staff Signature		
		Check # and Date issued	Staff Signature		
		Any Comment:	Staff Signature		
(Updated January 2019)					