



# Application for Internship

Please submit this application with your resume and cover letter to:

WICZ-TV  
Attn: Internship Program  
4600 Vestal Parkway E.  
Vestal, NY 13850  
newsdirector@wicz.com  
fax: 607-770-7550

First name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
(please print)

Address: \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

College/University: \_\_\_\_\_

I am a:    freshman                  sophomore                  junior                  senior                  graduate student  
(please circle)

Advisor: \_\_\_\_\_ Title: \_\_\_\_\_

Advisor fax: \_\_\_\_\_ Advisor e-mail: \_\_\_\_\_

This internship will be for:  
fall                          spring                          summer                          field/independent studies  
(please circle)

I am requesting to intern \_\_\_\_\_ hours per week.

Please circle your availability:

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday
AM PM	AM PM	AM PM	AM PM	AM PM	AM PM

I am most interested in learning about:

Producing/reporting                  Video production                  Both  
(please circle)

Please describe why you are interested in pursuing a career in broadcast journalism or video production: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Feel free to attach additional information.*