

## **PEAK Centre Internship Application**

1. Applicant Name:			
2. Address:			
3. Telephone: 4. Email address:			
5. Current/Past Academic	Institution At	tended:	
6. Program Name and De	gree to be red	ceived:	_
7. Internship Requested (a Fall: September 1ship: September 1ship: January 5th Summer: May 1sthip: Consecute 9 Month: Consecute 12 Month: Consecute 18 Month: Consecut	to Decembe to April 30 <sup>th</sup> o August 30 <sup>th</sup> tive 6 month p tive 9 month p utive 12 mont	er 20 <sup>th</sup> n placement placement	bly beginning in September
8. References: Academic Reference Affiliate Institution: Relationship: Phone: Email address:	ce Name:		
Professional Refere Affiliate Institution: Relationship: Phone: Email address:	ence Name:		

9. In 500 words or less, please explain why you would be an excellent candidate for an Internship at PEAK Centre. Please include information as to how your contribution to this program would exceed that of other applicants, and also what you'd like to take away from your overall PEAK Centre experience.