



**What do you hope to learn through your internship experience with WSNC?**


**RADIO PRODUCTION INTEREST**

<b>AUDIO EDITING</b>	YES <input type="checkbox"/> NO <input type="checkbox"/>	I have experience in audio editing: YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes explain:
<b>MARKETING</b>	YES <input type="checkbox"/> NO <input type="checkbox"/>	I have marketing experience: YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes explain:
<b>ON AIR ANNOUNCING</b>	YES <input type="checkbox"/> NO <input type="checkbox"/>	I have experience on air announcing: YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes explain:
<b>RADIO ENGINEERING</b>	YES <input type="checkbox"/> NO <input type="checkbox"/>	I have experience in radio eng. YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes explain:
<b>RADIO PROGRAMMING</b>	YES <input type="checkbox"/> NO <input type="checkbox"/>	I have experience in radio prog.: YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes explain:
<b>FUNDRAISING NONPROFIT</b>	YES <input type="checkbox"/> NO <input type="checkbox"/>	I have experience in fundraising: YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes explain:
<b>MEMBER RECRUITMENT</b>	YES <input type="checkbox"/> NO <input type="checkbox"/>	I have experience in recruitment: YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes explain:
<b>SALES</b>	YES <input type="checkbox"/> NO <input type="checkbox"/>	I have experience in sales: YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes explain:

**INTERNSHIP TERM**

<b>WHAT TERM ARE YOU INTERESTED IN?</b>	Spring 2015 <input type="checkbox"/>	Fall 2016 <input type="checkbox"/>
	<i>Deadline to submit 1/29/2016</i>	TBA
	75hr Program <input type="checkbox"/>	150hr. Program <input type="checkbox"/>

**What Days are You Available?**

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
<b>DAYS</b>							
<b>TIMES</b>							

I, \_\_\_\_\_ certify that all information provided is accurate.

Date Submitted \_\_\_\_\_