



# P.E.A.C.E., Inc. Internship Application

**To Applicant:** We appreciate your interest in applying for an internship with P.E.A.C.E., Inc. Please provide the information requested below so we can process your request.

Name			
Current Address			
Permanent Address			
Phone			
Alternate Phone			
E-Mail Address			
College or University			
Supervising Professor			
Phone and E-mail Address of Supervising Professor			
Class Year (Circle One)	Freshman Sophomore	Junior Senior	Graduate
Major			
Cumulative GPA			
Type of Internship (Circle One)	Senior Services Head Start IT	Energy & Housing Nutrition Planning	Family/Community Development Big Brother/Big Sister Other:
Internship Start Date			
Number of Internship Hours Requested per Semester			