

Undergraduate Internship Awards Program

PERSONAL INFORMATION

Student Name: _____

Major: _____ Minor: _____

Home Address: _____

EMPLID: _____

E-mail: _____ Phone Number: _____

Projected Graduation Date: _____

PLANNED INTERNSHIP

This award supports planned credit-bearing Internships in the Fall 2025 semester and/or the Spring 2026 semester. What internship are you planning? If possible, provide details on organization, supervision, and specific duties.

OBJECTIVES

In 100 words or less, describe how the planned Internship Award will contribute to your professional development.

Completed applications must be received by the deadlines stated in the Undergraduate Internship Award Program Criteria. Applications must be submitted online ONLY.
Send completed PDF to: anne.swartz@baruch.cuny.edu

CURRENT OR COMPLETED INTERNSHIPS

This award supports students who have completed an internship in the major field prior to the awarded internship semester. What internship(s) in your major field have you already undertaken?

Name of Company or Organization: _____

Supervisor's Name: _____

Supervisor's Contact Information: _____

Baruch Faculty Advisor: _____

Dates of Internship: _____

In 50 words or less, describe the internship.

CURRENT OR COMPLETED INTERNSHIPS (if more than one)

Name of Company or Organization: _____

Supervisor's Name: _____

Supervisor's Contact Information: _____

Baruch Faculty Advisor: _____

Dates of Internship: _____

In 50 words or less, describe the internship.

If more than two internships in the major field have been undertaken, additional pages may be attached.