



Internship Program Application

Name: _____

Address: _____

Telephone Number: _____

Cell Phone Number: _____

College/University: _____

Degree Program/Projected Graduation Date: _____

Are you seeking an internship for credit toward graduation? Y N

If yes how many credit hours are you seeking? _____

Name and phone number of your College Advisor: _____

Circle your areas of interest

Development (corporate communications, fundraising, marketing, promotion, sales and special event planning)

Engineering (equipment maintenance, information technology and master control)

Finance

Human Resources

Outreach

Production (audio, directing, editing, field videography, producing, studio)

Programming and Traffic

-more-

How many hours per week would you be able to devote toward the internship?

Would you be able to work weekends if needed? Y N

How did you hear about the WTVI Internship Program? _____

Please submit the completed application along with a cover letter, a resume and two letters of recommendation to:

Paulette Martin-Whitfield
Director of Administrator
WTVI
3242 Commonwealth Avenue
Charlotte, NC 28205

WTVI is an essential community resource connecting people in the heart of the Carolinas.