

1955 West Baseline Road, Suite 113-624, Mesa, AZ 85202 • www.iapaindia.org • 480.274.3561 • dlr33consulting@gmail.com

Summer Internship Program Application

Please fill out the following application and return the completed form by email attachment to dlr33consulting@gmail.com by **December 8, 2017**.

Full Name:		
Date of birth (mm/dd/yy):		ajor:
Years in college:		
Mailing Address:		
Email Address:		
Phone Number:		
1.	. Please detail any previous Work/Volunteer/Comm	unity Service:
2.	Current extracurricular activities (sports, clubs, e	te):
3.	. Why do you want to be part of the Student Intern	Program with IAPA?
4.	. What skills and qualities would you bring to the S	tudent Intern Program with IAPA?
5.	. How do you feel you will benefit from being a Stud	lent Intern with IAPA?
6.	6. What other information about you do you feel is re	elevant to this position.