COLLEGE INTERNSHIP PROGRAM

Sections I, II and III should be filled out, and signed, in consultation with your internship coordinator and/or faculty advisor. Mail the completed and signed application, resume, cover letter, and transcripts to:

Jerome Chester  
Director of Programming & Public Affairs  
WBAL-TV 11 College Internship Program  
3800 Hooper Avenue  
Baltimore, Maryland 21211  
Email: jerome.chester@hearst.com

SECTION I (Student must complete.) NAME:

AVAILABLE INTERNSHIPS:
See the Internship Application’s companion piece for internship descriptions. Once you have met all of the requirements, you will interview with your prospective Intern Supervisor. Place a check in the boxes for the departments that are of interest to you.

**WBAL-TV 11 NEWS**  
News Assignment Desk [ ]  
TV Engineering [ ]  
Sports [ ]  
Web [ ]

**WBAL-TV 11**  
Sales [ ]  
Promotions [ ]  
Public Relations/Affairs [ ]  
Television Programming [ ]
SECTION II (Student must complete.)

Request for: Spring [ ] Summer [ ] Fall [ ]
Student’s name: ____________________________
Address: ______________________________________
Phone: ______________________________________
Email: ______________________________________
Social Security Number Last 4 Digits: ____________________________
Birthdate: ____________________________
College/University: ____________________________
Class (circle one): Senior Junior Graduate Studies Program
Graduation date: ____________________________
Overall GPA: ____________________________
Briefly state why you wish to undertake this internship:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

WBAL-TV 11 internships require two or three 8-hour days. (Example Tues. & Thur. 9-5 or Mon, Wed. Fri. 9-5. This may not be the case). Please check which days you are available to work.
Mon [ ] Tue [ ] Wed [ ] Thu [ ] Fri [ ] Sat [ ] Sun [ ]
List all related courses completed to date, and letter grades from each:

<table>
<thead>
<tr>
<th>COURSE</th>
<th>GRADE</th>
<th>COURSE</th>
<th>GRADE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

NOTE: Students must be enrolled in an Internship Class to receive credit. A sealed official transcript must accompany this application for verification.
**SECTON III** (Faculty sponsor must complete.)

What are the learning objectives for the student?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

What will you expect the student to submit as evidence of the internship?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

**WBAL-TV 11 internships require two or three 8-hour days.** How many hours per week must the student work in order to receive college credits? Hours per week: [   ]

This verifies that __________________________ will receive [   ] college credits for this internship.

Does the school’s liability insurance cover this student while he/she is performing field study for WBAL-TV 11 in exchange for college credits? Yes [   ] No [   ]

Signature of Faculty Sponsor Date
________________________________________________________________________

College / University
________________________________________________________________________

Street Address
________________________________________________________________________

City State Zip
________________________________________________________________________

Telephone Number & Email Address