



DEPARTMENT OF FINANCE, INSURANCE AND LAW

Illinois State University

FINANCE INTERNSHIP APPLICATION FORM

Please submit the information below to the Finance Internship Coordinator: Chris Tamm (ctamm@ilstu.edu) along with the:

- a) Intern Liability Acknowledgement;
- b) Health Insurance Certification Form.

If you have already obtained an internship, also submit:

- c) Internship verification form and
- d) Position description.

- FALL
- SPRING
- SUMMER

Name: _____ Major: _____

University ID Number: _____ Minor: _____

Local Address: _____ Local Phone: _____

Home Address: _____ Home Phone: _____

City, State, Zip: _____ E-mail Address: _____

Expected Graduation Date: _____ Overall Grade Point Average: _____

Please rank these areas of special interest in Finance as to your choice in placement (1 = 1st choice, etc.):

Banking __ Brokerage __ Corporate __ Government __ Insurance __ Investments __ Real Estate __ Other __

Post-graduation plans (grad school, type of work desired):

Finance/Insurance/Accounting Courses completed with grade and courses currently enrolled in:

Computer Software in which you have had experience:

Previous work experience:

If for Fall/Spring, could you work outside Bloomington/Normal, (e.g. Peoria, Pekin, Decatur)? Yes ___ No ___

If for Summer, cities in which you are interested in working: _____

Faculty References (preferably from Finance, Insurance & Law Department):

Professor: _____

Course: _____

Semester Taken: _____

Professor: _____

Course: _____

Semester Taken: _____