

## The Ruth M. and Brackett H. Clark Internship Support Application Form

Submit to: CoLA Assistant Dean Brad Rosenbaum, [bjrgla@rit.edu](mailto:bjrgla@rit.edu)

### Materials needed for submittal:

- Verification of internship/co-op (i.e. offer letter, e-mail, etc.)
- Budget Worksheet (see attached): anticipated expenses and rationales (please include cost research)

APPLICANT: \_\_\_\_\_ Degree Program \_\_\_\_\_

Current Cumulative GPA: \_\_\_\_\_

1. Please provide the following information regarding your co-op/internship:

- Name of company/organization \_\_\_\_\_
- Title of co-op/internship \_\_\_\_\_
- Dates of co-op/internship: Begin: \_\_\_\_\_ End: \_\_\_\_\_
- Please check one:              Full-time              Part-time
- Is this a paid co-op/internship?              Yes              No              If yes, hourly rate: \_\_\_\_\_

2. Describe your proposed co-op/internship along with your primary responsibilities in 100 words or fewer.

3. Explain in what way(s) your co-op/internship supports your academic and/or professional plans.

4. Please explain why/how the receipt of a Clark Scholarship is necessary in order for you to pursue this proposed co-op/internship.

5. Please indicate whether you have applied for and/or will be receiving any other payments for this proposed co-op/internship [source(s) and amount(s)].

6. Is there anything else that you consider important or would like the reviewing committee to know about your co-op/internship?

7. **Attestations:**

I certify that the information contained in this this application is true and correct to the best of my knowledge, and that the internship for which I seek support will be credited toward my undergraduate RIT program of study in RIT's College of Liberal Arts. I further agree to submit a 2 - 3 page summary of my experience to the Office of Student Services within three weeks of the beginning of the semester following this internship.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

I have read this proposal from \_\_\_\_\_, a student enrolled in my department's program, and attest that this internship/co-op has value with regard to the student's professional preparation.

\_\_\_\_\_  
Chair of Degree Program Signature

\_\_\_\_\_  
Date

(Budget worksheet to be submitted with the following application forms)

- \* Clark Internship Support Application
- \* Simmons Internship Fund Application
- \* Student Conference Fund Application
- \* Student Research Fund Application
- \* Student Study Abroad/Research Travel Application

**Instructions:** Complete the budget worksheet below by entering the estimated expense total costs into Column 2. The total expenses amount will automatically calculate at the bottom of the worksheet. Column 3 may be used for any additional comments and notes to explain your expenses.

LODGING EXPENSES		Estimated Total Cost	** Please use this column for any additional comments and notes **
Hotel Accommodations	\$_____per night		
Housing/Rent			
\$_____per month or \$_____per week			
LODGING TOTAL			
TRANSPORTATION EXPENSES		Estimated Total Cost	
Airfare			
Taxi, Rideshare fees (Uber)			
Public Transit			
Parking			
Mileage (Includes gas) (Total Miles) x (Current Rate) = _____			* If traveling with other students in a carpool, only the driver can be reimbursed for mileage.
TRANSPORTATION TOTAL			
MEAL EXPENSES		Estimated Total Cost	
Food/Drinks (Non-Alcoholic)			
Other (Specify): _____			
MEAL TOTAL			
CONFERENCE EXPENSES		Estimated Total Cost	
Registration Fees			
Poster Fees			
CONFERENCE TOTAL			
RESEARCH EXPENSES		Estimated Total Cost	
Gift Cards - Amazon, etc.			
Equipment Fees			
RESEARCH TOTAL			
MISCELLANEOUS EXPENSES (List Below)		Estimated Total Cost	
MISCELLANEOUS EXPENSE TOTAL			
TOTAL EXPENSES			