

**APPLICATION FOR ILLINOIS BROADCASTERS ASSOCIATION
MINORITY INTERNSHIP GRANT**

(Please type or print neatly)



Name: _____

School Address: _____
(Street, Apt #, City, Zip)

Home Address: _____
(Street, Apt #, City, Zip)

E-mail Address: _____

Cell Phone: _____

Home Phone: _____

Major Area of Study:

Minor Concentration:

Class:

Overall GPA

Major GPA

Total Hours Passed:

Major Hours Passed:

Expected Graduation Date:

(The following items may be submitted on a separate paper or email)

Career Objective (Be as Specific as Possible):

Broadcast, Media and/or Writing Experience Other than Classroom:

Extra Curricular Activities:

When you graduate, what kind of job will you seek? (Be specific and realistic.):

I agree that I will serve a summer internship at a broadcast organization, to be selected by the IBA, if I receive the IBA-MIP award.

Date: _____ Signature: _____

Print Name: _____

Items Required:

1. Application must be accompanied by three (3) letters of recommendation from faculty or broadcast professionals familiar with your academic progress and career potential.
2. Attach your current Resume.
3. Attach a typed 250-word essay to answer the following question: "How do you expect to benefit from an IBA-MIP grant?"
4. Include a copy of your writing style for a broadcast project.

STUDENTS MUST HAVE ALL REQUIRED DOCUMENTS IN ORDER TO INTERVIEW.

Return this application, letters of recommendation, resume and essay to your internship coordinator.

Illinois Broadcasters Association – 2501 Chatham Road – Springfield, IL 62703 – 217-793-2636