



**Bryant High School Internship Program
Business Needs Form**

Business name: _____

Your Name: _____

Email _____

Phone _____

How many interns would you be interested in hosting?: _____

The internship would be (please circle one): PAID UNPAID

Will there be special training your intern(s) needs to complete?: YES NO

Would this training take place at your business location?: YES NO

What time of day would you prefer to have an intern(s)? (please circle one):

MORNING

AFTERNOON

BOTH

OTHER (please explain below)

Can you host an intern who is under 18 years of age?: YES NO

What would be the role/responsibilities of the intern(s)?

What special skills, if any, would you prefer your intern(s) to have?:
