

ACADEMIC INTERNSHIP PROGRAM <u>Job Description</u>

This form is provided for employer convenience. Alternately, this information may submitted in Handshake via mustangshire.org or with URL of company web posting.

Location:

Company/Organization:

Hiring Manager/Supervisor:	Contact Email:			
Contact Phone:	Contact Mailing Address:			
Web Address:	Position Title:			
Paid or Unpaid:	Rate of pay (if applicable):			
Student to be hired (if already known):	Method of application (if still soliciting applications):			
Essential responsibilities and duties (listing most important first):				

Essential jo requiremen	•	n as education, experie	nce, required skills, pref	erred skills, and/or physical
performed. It the position.	is not intended to be c		e list of all responsibilities	nature and level or work being s, duties, and skills required for
Name of Person Completing Form:		Title:		
Signature:		Date:		
Office use	Course:	Professor Sig	nature of Approval:	Date:

Campus Contact:

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