INTERNSHIP APPLICATION
Fox 26 KTRV – My 20 KTXH TELEVISION STATION
4261 Southwest Freeway, Houston, TX 77027

All qualified applicants (students) will be given equal consideration regardless of race, color, age, sex, religion, disability or ethnic background.

NAME: ____________________________________________________
PRESENT ADDRESS: _________________________________________
CITY: _______________________ STATE: _________ ZIP: ___________
TELEPHONE: ____________________________
EMAIL ADDRESS___________________________________________

SEMESTER YOU WANT TO BE CONSIDERED FOR AN INTERNSHIP:
( ) FALL 20___ ( ) SPRING 20___ ( ) SUMMER 20___

REFERRED BY:
SCHOOL__________________________________________________
PUBLICATION_____________________________________________
JOBFAIR__________________________________________________
EMPLOYEE________________________________________________
OTHER____________________________________________________
ON MY OWN_______________________________________________

UNIVERSITY/COLLEGE CLASSIFICATION:
JUNIOR _____ SENIOR _____ GRADUATE STUDENT _____

EDUCATION:
University/College__________________________________________
School Address_____________________________________________
Major/Minor________________________________________________
Professor’s Name:___________________________________________
Telephone: ____________________ Business Hours________________
Email Address_______________________________________________

COURSE NAME AND NUMBER FOR WHICH CREDITS WILL APPLY:
How many credit(s) will you receive for the internship? ________________
How many hours are required to receive the credit(s)? ________________
DEPARTMENT(S) OF INTEREST:
Please indicate three (3) Departments of interest with one (1) being your first choice

News _____ Creative Services/Marketing _____

Production _____ Digital _____ Weather _____

SCHEDULE AVAILABILITY:

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Signature ___________________________________ Date _____/_____/________