

**Ohio College of Podiatric Medicine
2010 Pre-Professional Internship Application**

Application Deadlines:
Monday December 21, 2009 (for Jan. programs)
Monday, May 24, 2010 (for June programs)
Monday June 28, 2010 (for July program)

Personal Information

Name: _____ Gender: _____

Current Address: _____

Phone: _____ Email Address: _____

Program Preference: _____ January 4-8th Session
_____ January 11-15th Session
_____ June 7-11th Session
_____ June 14-18th Session
_____ July 12-16th Session
_____ July 19-23rd Session

Permanent Address: _____

Academic Information

Major: _____ Name of College/University: _____

Class Year: _____ # of Credit Hours Completed: _____

Science GPA: _____ Overall GPA: _____ Expected Graduation Date: _____

Work Experience

Organization	Position/Title	Dates of Employment
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1. _____

Description of Duties: _____

Organization	Position/Title	Dates of Employment
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2. _____

Description of Duties: _____

Organization	Position/Title	Dates of Employment
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3.

Description of Duties:

