University of Louisiana at Lafayette  
B. I. Moody III College of Business Administration  

**Business Internship Job Description**  
(Please complete a separate form for each unique job description)

Name of Company:  ________________________________________________________________

Company Address:  ________________________________________________________________

Contact Person and Title:  __________________________________________________________

Phone:  ______________________  Fax:  ______________________

Email Address:  ______________________  Website:  ______________________

Internship Title:  __________________________________________  Number of Interns desired: ______

Internship Date:  __________  Approximate hours per week:  __________

Semester/Year  

Approximate Salary:  ______________________  per:  □ Hour  □ Week  □ Month  □ Semester

<table>
<thead>
<tr>
<th>Academic Majors: (Check all that apply)</th>
<th>Class Level:</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Accounting</td>
<td>□ Marketing</td>
</tr>
<tr>
<td>□ Economics</td>
<td>□ MBA Health Care Administration</td>
</tr>
<tr>
<td>□ Finance</td>
<td>□ MBA General</td>
</tr>
<tr>
<td>□ Hospitality Management</td>
<td>□ Professional Land &amp; Resource Mgmt</td>
</tr>
<tr>
<td>□ Insurance &amp; Risk Management</td>
<td>□ Other:  ______________________</td>
</tr>
<tr>
<td>□ Management</td>
<td>□ Any</td>
</tr>
</tbody>
</table>

Desired Skills:  

________________________________________________________________________

________________________________________________________________________

Major Responsibilities/Projects of the Intern Position:  

________________________________________________________________________

________________________________________________________________________

How should applicant apply for the position?  

☐ Résumé  

☐ Other:  ______________________  Via:  □ Mail  □ Email  

☐ Other:  ______________________  □ Other:  ______________________

Deadline to apply:  ______________________

Could the intern position become full-time employment?  □ Yes or  □ No

How did you hear about us?  ______________________

Please return completed form to:  Fax:  337-482-5836  Email:  internship@louisiana.edu