



International
Alliance for the
Prevention of AIDS

1955 West Baseline Road, Suite 113-624, Mesa, AZ 85202 • www.iapaindia.org • 480.274.3561 • dlr33consulting@gmail.com

Summer Internship Program Application

Please fill out the following application and return the completed form by email attachment to dlr33consulting@gmail.com by **December 8, 2017**.

Full Name:

Date of birth (mm/dd/yy):

Major:

Years in college:

Mailing Address:

Email Address:

Phone Number:

- 1. Please detail any previous Work/Volunteer/Community Service:**
- 2. Current extracurricular activities (sports, clubs, etc):**
- 3. Why do you want to be part of the Student Intern Program with IAPA?**
- 4. What skills and qualities would you bring to the Student Intern Program with IAPA?**
- 5. How do you feel you will benefit from being a Student Intern with IAPA?**
- 6. What other information about you do you feel is relevant to this position.**