



DEPARTMENT OF  
SOCIOLOGY AND CRIMINOLOGY

REQUEST FOR INTERNSHIP PLACEMENT<sup>1</sup>

Student's Name \_\_\_\_\_ Date \_\_\_\_\_.

WKU ID # \_\_\_\_\_ Email Address \_\_\_\_\_.

Local Address \_\_\_\_\_.

Preferred Phone \_\_\_\_\_.

Are you presently working? \_\_\_\_\_ If yes, where?  
\_\_\_\_\_.

Position \_\_\_\_\_ Business Phone \_\_\_\_\_.

Days which you work \_\_\_\_\_.

Will you have access to a car during your internship assignment? \_\_\_\_\_.

Write a brief autobiographic sketch which includes pertinent information about your life, work, volunteer, and educational experience(s) (attach a separate sheet if necessary).

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<sup>1</sup> Return a copy of this form to an internship coordinator (Dr. Holli Drummond [holli.drummond@wku.edu](mailto:holli.drummond@wku.edu) in Grise Hall 100; OR via post to the address below).

In as much detail as possible, please describe the learning opportunities you hope to experience via your field placement (attach a separate sheet if necessary).

### **Placement Interests**

Will you be completing the Criminology Internship (CRIM 439) **OR** the Sociology Internship (SOCL 494)? \_\_\_\_\_.

Semester for which you desire an internship placement \_\_\_\_\_.

County/location in which you are requesting placement \_\_\_\_\_.

If known: Specific Agency in which you would like to be placed (include location details)

\_\_\_\_\_.

### **Areas of interest**

**POPULATION:** Mark the populations which you wish to be placed (For your first choice, place #1, for second choice, #2, and so on).

\_\_\_\_\_ Adolescents

\_\_\_\_\_ Children

\_\_\_\_\_ Diverse/Multicultural groups

\_\_\_\_\_ Women

\_\_\_\_\_ Adults

\_\_\_\_\_ Elderly

\_\_\_\_\_ Mentally Ill

\_\_\_\_\_ Families

**TYPE OF SERVICE:** Mark the types of service which you wish to be placed (For your first choice, place #1, for second choice, #2, and so on).

\_\_\_\_\_ Probation & Parole

\_\_\_\_\_ "Other" community Corrections

\_\_\_\_\_ Correctional Institution

\_\_\_\_\_ Law Office (including County Attny.)

\_\_\_\_\_ Community Action

\_\_\_\_\_ Non-Profit Community Org.

\_\_\_\_\_ Health Care

\_\_\_\_\_ Research Organization

\_\_\_\_\_ Mental Health Care

\_\_\_\_\_ Alcohol/Drug program

\_\_\_\_\_ Police

\_\_\_\_\_ Pretrial release

\_\_\_\_\_ Courts

\_\_\_\_\_ Public Assistance/Social Welfare

\_\_\_\_\_ Federal Agency (takes 6 months  
from time of application)

\_\_\_\_\_ Educational Program

I hereby authorize the Western Kentucky University Department of Sociology Internship Coordinator to release information concerning my educational qualifications to any agency considering me for an internship placement.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

*The Spirit Makes the Master*

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