

Internship Application

CONTACT INFORMATION: Please let us know how we can contact you. Name Date City, State, Zip **Address** Phone Email **EDUCATION:** School Major / Hours Completed **Expected Graduation Date** Overall GPA / Major GPA Current Standing ☐ Freshman ☐ Sophomore ☐ Junior ☐ Senior ☐ Post-Graduate Classes completed (relevant to your major / this internship) **EMPLOYMENT:** Current / Previous Employer Position / Length of Employment Available Start Date / Semester What is your class schedule? ☐ M ☐ Tu ☐ W ☐ Th ☐ F What is your work availability? \square M $_$ \square Tu $_$ \square W $_$ \square Th $_$ \square F $_$ (Please indicate hours each day.) What are you looking for in an internship? What are your education / career goals? How did you hear about SGC? □ Career Fair □ Job Bank □ Website □ Current Employee □ Other _ When you submit this application, please send a copy of your transcript (an unofficial transcript or online academic audit report will be fine).

Please email to recruiting@sgcaccounting.com or fax to 713-290-8183 ATTN Recruiting.