

ARL Open D.O.O.R. Summer Internship Program



PennState
Applied Research
Laboratory

Name (last) (first) (MI)

Campus Address (street, apt.) City State ZIP

Permanent Address (street, apt.) City State ZIP

TELEPHONE INTERVIEW: Home Work (pick one)

Telephone number and best time to call

E-mail address

Present position (student, graduate assistant)

Citizenship U.S. USCIS Number

Academic standing Freshman Sophomore Junior Senior Masters Doctorate

College or University

Major Cumulative GPA / 4.00

Expected graduation date (month/year)

Field of present research activity or special knowledge and/or interest

Have you participated in this program previously? Yes No If yes, when?

To determine which members of a diverse segment of the population are reached by this announcement, please fill in the appropriate blocks:

Male Female Disabled Yes No Underrepresented minority Yes No

African American Hispanic Native American Asian Pacific Islander Other

RECOMMENDATION: Please provide the following information about the person who will give a recommendation.

Name Title

Address Phone

Please attach a copy of your most recent unofficial transcript, resumé, and a letter of recommendation from a dean, academic advisor, or instructor.

SEND COMPLETED ELIGIBILITY FORM BY MARCH 1 TO:

Hope Gibbs
Applied Research Laboratory
P.O. Box 30
State College, PA 16804-0030

DIRECT INQUIRIES TO:
Hope Gibbs
(814) 867-3936
Email: hrg5090@arl.psu.edu

OFFERS OF APPOINTMENT WILL BE MADE BEGINNING IN MARCH AND ENDING WHEN ALL POSITIONS ARE FILLED.

U.S. Citizenship and Background Check Required