



Work-based Learning Information Form

Please complete this form if you are interested in hosting a student intern or hiring a student from Bethlehem Central High School. If you have any questions please contact Nick Petraccione at (518) 439-4921 Ext. 22053.

Required				
Company/Organization Name *				
2. Street Address *				
3. Zip Code *				
4. Phone Number *				
5. Please select the career cluster your company/organization falls in: Mark only one oval.				
Agriculture, Food, and Natural Resources				
Architecture and Construction				
Arts, Audio/Video Technology, and Communications				
Business, Management, and Administration				
Education and Training				
Finance				
Government and Public Administration				
Health Science				
Hospitality and Tourism				
Human Services				
Information Technology				
Law, Public Safety, Corrections, and Security				
Manufacturing				
Marketing, Sales, and Service				
Science, Technology, Engineering, and Mathematics				
Transportation, Distribution, and Logistics				

Ple	ase provide information for the person we should contact about the internship or part-time job.
6.	Name *
7.	Title
8.	Phone Number *
9.	Email Address *
Ple	ternship Information ase identify the different types of internships our students will be able to experience (Ex. Accountant, se, etc) at your company/organization
10	
11.	Approximate number of hours per week you can provide for the intern(s): Mark only one oval.
	1-5 Hours
	6-10 Hours
	10-14 Hours 15+ Hours
	b Employment Section ase complete this section if you have a part-time job that needs to be filled.
12	Job title:

13. Description:			
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14. Job responsibilities:			
15. Job qualifications:			
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16. Approximate number of hours per we Mark only one oval.	eek needed for th	is position:	
1-5 Hours			
6-10 Hours			
10-14 Hours			
15+ Hours	/		

