

Cardiovascular Exercise Physiology

Internship Application

Date: _____

Internship Information: Semester interested: (circle) Spring / Summer / Fall Year _____

I am receiving college credit for this internship yes no Number of hours required _____

Personal Information:

First Name _____ Last Name _____

Phone Number _____ Email Address _____

Education Information:

College/University _____ Major/Track _____

Expected Graduation _____ / _____

Classification undergraduate graduate

Relevant Courses _____

ECG courses yes no

Experience & Goals Information:

List any experience in cardiac rehab/physical medicine/healthcare setting etc.

List any certifications held or interested in (CPR, ACSM etc.)

Explain why you are interested in this field and what you hope to gain from the internship

Describe some of your strengths

Describe something that you can improve on

Where do you want your career to be in 5 or 10 years
