

Advising Intern Application



Office of Academic Advising Programs

California State University, Chico

Student Service Center 110

Phone: (530) 898-5712

Email: chicoadviser@csuchico.edu

Visit our website: <http://em.csuchico.edu/aap/>

Name _____

Chico State ID # _____

Local Address

Permanent Address (if different)

() _____

Local Phone

E-mail Address

() _____

Summer Phone

Major _____ Class Level _____ Degreed Earned _____

Will you be available during January intersession? _____ Are you available to work this summer? _____

Will you be available for fall semester by August 11, 2010? _____

How many semesters beyond spring '10 do you plan to attend Chico? _____

Please use an additional sheet of paper to answer the following questions.

What specific courses have you completed which demonstrate counseling and/or communication skills?

List all relevant experience, paid or volunteer.

Describe your understanding of the function of the Academic Advising Programs Office.

How does an Advising Intern position relate to your career or professional development goals?

Local instructors, employers, and/or supervisors familiar with your relevant skills and personal qualities:

1.

Name

Address

Phone

2.

Name

Address

Phone

3.

Name

Address

Phone

I hereby authorize the Academic Advising Programs Office access to my CSU, Chico records.

Signature

Date

Return to Academic Advising Programs, Student Service Center 110, by: October 23rd 2010