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Student Volunteer Application

- College Student
 High School Student

(Please Print)

Name _____

Local Address _____ Apt # _____

City _____ State _____ Zip Code _____

Local Phone # (_____) _____ E-Mail _____

Permanent Address _____

City _____ State _____ Zip Code _____

Permanent Phone # (_____) _____

Major _____ Expected Graduation Date _____

Are you planning on receiving internship credit through the College of Communications? _____
(If yes, please specify the semester and number of credits) _____

Relevant Completed Courses _____

Experience/Relevant Skills _____

Why do you think you would make a good C-NET Volunteer? _____

How did you hear about C-NET volunteer/internship opportunities? _____

When are you available to start? _____

Applicant Signature _____ Date _____

For Office Use Only

Executive Director Signature _____ Date _____

Orientation Date/Time _____