

**FORM C**  
**INTERNSHIP APPLICATION**

**Student's Name** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Address** \_\_\_\_\_

**Name of Church** \_\_\_\_\_

**Mentor's Name** \_\_\_\_\_ **Position** \_\_\_\_\_

**Address** \_\_\_\_\_ **Phone** \_\_\_\_\_

<u><b>TYPE OF INTERNSHIP</b></u>	<u><b>GIVE PARTICULAR ASSIGNMENTS</b></u>
_____ Pastoral Ministry	_____
_____ Religious Education	_____
_____ Music Minister	_____
_____ Youth Minister	_____
_____ Social Work	_____
_____ Other	_____

**STUDENT'S SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

**SIGNATURE OF POTENTIAL MENTOR** \_\_\_\_\_

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**RETURN TO:** Internship Professor, CCBBC, 300 Clear Creek Rd., Pineville, KY 40977