

Kaplen JCC on the Palisades, UJANNJ, JFS of Bergen and North Hudson, & JFS of North Jersey
Internship Program

Application for Internships

General Information

Company/Organization Name _____

Please write a short description about what your company does.

Address _____

Phone _____

Website _____

Contact name _____

Phone _____

E-Mail Address _____

Internship Information

Approximate start dates for Internship _____

Unpaid _____

Paid _____

Part time internship _____

Full Time Internship _____

Please write a short description of the position(s) you have available.

Time Length:

___ 1 Month

___ 3 Months

___ 6 Months

___ 1 Year

Is there possibility for future employment with your company through this
internship? _____

**If you have multiple positions available please fill out the internship information
for each position.

We would like to be listed in the Internship Program database.

YES _____ NO _____

APPLICATIONS MAY BE EMAILED TO: internships@jccotp.org

OR FAXED TO: 201-569-7448