



Internship/Cooperative Education Program Application Form - Puerto Rico

NAME: _____

UNIVERSITY: _____

ADDRESS: _____

PHONE: _____

EMAIL: _____

DATE OF AVAILABILITY: From: _____

To: _____

Have you ever been an Industry Intern? Yes _____ No _____

COMPANY: _____ Year: _____

EDUCATION:

HIGH SCHOOL NAME	DEGREE:
LOCATION	
DATES ATTENDED	From: To:
COLLEGE NAME:	DEGREE:
LOCATION:	
DATES ATTENDED:	From: To:

**Unilever Internship/Cooperative Education Program
Puerto Rico**



Date you expect to receive your degree: _____

Other significant educational experiences (i.e. certifications, training seminars etc.):

Employment / Experience (List most recent first)

EMPLOYER:	
ADDRESS:	
DATES:	From: _____ To: _____
POSITION:	
SUPERVISOR:	Phone: ()

EMPLOYER:	
ADDRESS:	
DATES:	From: _____ To: _____
POSITION:	
SUPERVISOR:	Phone: ()

EMPLOYER:	
ADDRESS:	
DATES:	From: _____ To: _____
POSITION:	
SUPERVISOR:	Phone: ()

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Have you participated in any College Organizations: If your answer is yes! Please provide your role in the Association.

Offices/ Committees:

Honors/Scholarships/Achievements:

What are you Career Goals?

How will this internship help you to attain your career goals as stated above?

What do you hope to gain by working as a Unilever intern?

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Why are you the ideal candidate for this internship?

After completing this application have it signed by the college recruiting officer.

Please attach:

- A resume
- An official transcript
- Two (2) sealed letter of recommendation written by the dean and/or faculty members at your University.

Send application to:

Unilever de Puerto Rico
Attention: Alexandra Iglio
PO BOX 70357
San Juan PR 00936-8357

Deadline:

December 18, 2009

Note:

Incomplete applications will not be processed.

Certification of Eligibility: (To be completed and signed by College Recruitment Officer)

_____ is pursuing full _____ or part time _____ study marketing. He/ She is a student in good standing (maintaining at least a 3.0 GPA or equivalent) at the _____ University and can expect to graduate in the Fall, Winter, Spring (circle one) of 20____.

Officer Signature:

Applicant Signature:

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Reference Form:

The applicant named below has selected you as a reference. Your comments are very important to our selection process and must be returned to the applicant in a sealed envelope.

Applicant's Name:

(First) (M) (Last)

Address:

Name of Reference:

Position:

Institution:

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Please evaluate the applicant relative to all students with whom you are associated:

1. How long have you known the student? Years: _____ Months: _____.

What is your relation with the applicant?

2. How would you rate the application's (circle one):

A. Communications Skills:

Written:

Average Good Superior

Oral (Presentation skills)

Average Good Superior

B. Team Alignment (Ability to work with others)

Average Good Superior

C. Leadership Skills:

Average Good Superior

D. Out of the box/ Creative Thinking:

Average Good Superior

F) Analytical Skills:

Average Good Superior

G) Entrepreneurial Skills:

3. To what extent has this applicant been active in professional or student activities or other professional associations?

4. Why do you recommend the applicant for this internship program?

5. Additional Comments:

Signature: _____

Date: