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Description automatically generated

**BHSU - SEDC Workforce Internship Program**

**Employer Application**

|  |  |
| --- | --- |
| Company Name | TYPE COMPANY NAME HERE |
| Authorized  Company Official | TYPE AUTHORIZED COMPANY OFFICIAL NAME HERE |
| Company Address  City/State/Zip | ADDRESS 1  ADDRESS 2  CITY, ST ZIP CODE |
| Phone Number | TYPE PHONE NUMBER HERE |
| Email Address | TYPE EMAIL ADDRESS HERE |
| Internship Dates Requested | Spring Semester  Summer Semester  Fall Semester |
| Type of Internship Funding Requested | Employer Funded  Partially Funded (up to $2,000 matched by employer)  Fully Funded (up to $4,000, no match) |
| Position Requested | TYPE POSITION REQUESTED HERE |
| Hourly Wage | $TYPE HOURLY WAGE HERE |

**Describe your business and how this internship will help your company grow or fill a critical workforce need. Please also attach a job description for the internship.**

**Submit your application via email to: office@spearfishdevelopment.com**