

Tabor School of Business Brechnitz Application

Today's Date: _____

Term: FA SP SU WI 20 _____

STUDENT INFORMATION:

Student Name _____

Student ID _____

Student Address _____

City/State/Zip _____

Cell Phone Number _____

Email _____

Major _____

Year: SO JR

SR GRAD Current GPA _____

If you are chosen a recipient, how will the funds be used?

For questions or to submit your application, email the Tabor Internship Coordinator at taborinternships@millikin.edu

FOR COORDINATOR USE ONLY

DATE

Application received _____