

Company Name \_\_\_\_\_

Contact Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

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All questions in this section must be completed to be eligible for grant.

1. Intern Job Description. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. List 2-3 skills that the intern will acquire. \_\_\_\_\_  
\_\_\_\_\_

3. Is this a new internship?  Yes  No

4. What is the compensation? \$\_\_\_\_\_/per \_\_\_\_\_(time period).

5. What is the expected length of the Internship? \_\_\_\_\_(weeks).

6. Is the intention that the Internship may lead to full-time employment?  Yes  No

7. Have you read and do you understand the [Internship Toolkit](#)?  Yes  No

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### Statements of Agreement for Applying Company

- Proof of compensation following completion of internship must be provided before grant will be issued.
- Grants are for new intern positions at ISSA member firms.
- Grants will be made at the sole discretion of the ISSA Foundation Board of Directors.
- ISSA Board Members and ISSA Foundation Board Members are not eligible to apply.
- One grant per company, per year, shall be allowed. The intern must be a full-time student at a college, junior college, or vocational school who is returning to school following the internship.
- Awards will be made first come, first served to applications which meet the criteria.
- Applications not receiving an award may receive priority in the following year, if requested.

### Grant Amounts and Timing:

- Foundation Grant applications must be submitted by April 1, 2018.
- Grant amount will be 50% of verified cash compensation up to a maximum of \$3,000 annual.
- For consideration of Grants the Internship period must be for full time employment (minimum of 30 hours per week) for a minimum of 5 weeks up to 13 weeks maximum.
- Grants will be made by June 15, 2018 and paid upon completion of the Internship and verification of payment.

I understand and agree to the above statements. I further verify that all information provided in this application is accurate, and if not, it will void my eligibility for this grant.

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Signature/Title

Date