



Intern Summary Report 2017 (To be filled out by INTERN)

Your Name: _____

Address: _____ Phone: _____ email _____

Station Call Letters: _____ Supervisor Name _____

1. Was your internship a worthwhile education experience? () Yes () No

Comments:

2. How did your intern experience influence your interest in a broadcast career?

() Increased () Decreased () No change

Comments:

3. List the department(s) you trained in?

4. Which department (s) did you enjoy the most? _____

5. Was there a good balance provided by the station between learning and doing?

() Yes () No

Comments:

6. What are your career goals now? _____

7. I would like information about the ABA "Linda Simmons Memorial Scholarship", for students enrolled in Broadcast Communications, Broadcast Engineering, Journalism or Marketing. () Yes () No *thank you*

Signature _____ Date: _____

This summary report must be submitted in order for the station to be eligible for future ABA Internship Grants

Please return: by email, fax or mail to: Alaska Broadcasters Association; Attention: Cathy Hiebert,
Executive Director, 700 W 41st Avenue, #102 Anchorage AK, 99503
Phone: 907-258-2424 / Fax: 907-258-2414 / akbagold@gci.net