



Station Post-Internship Report 2017
(to be filled out by intern SUPERVISOR)

Station Call Letters: _____ Public station: _____ Commercial station: _____

Supervisor Name/Title _____

Date(s) of Internship: _____

Intern Name: _____ Age: _____

School attended during internship (if applicable) _____

1. Statement of job description and training offered to the intern(s):

2. Overall Assessment of Intern's Effectiveness:

3. Will employment to be offered to the intern(s)?

No _____
Yes _____ (explain)

4. Our station intends to apply again next year for the ABA Internship Grant

No _____
Yes _____ (explain)

Other comments (please use additional sheet if necessary)

***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