



**2026 Intern Summary Report**  
**(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?

---

---

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 41<sup>st</sup> Avenue, #102 Anchorage AK, 99503

Phone: 907-258-2424 / Fax: 907-258-2414 / [akbagold@gci.net](mailto:akbagold@gci.net)