



**NAFB FOUNDATION  
INTERNSHIP GRANT APPLICATION**

NAFB Member/Applicant: \_\_\_\_\_

Station/Network: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

*Please take some time and thought as you complete this application.  
The more detail, the better.*

**Intern Job Description:**

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**What skills will the intern learn?**

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**Internship time frame/work schedule of intern?**

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**How will the intern be selected?**

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Click the "submit" button in the upper-right corner to forward your application.  
Please call Jennifer at 816.431.4032 with any questions.