



# Hawaii Food Manufacturers Association

## Intern Request Form

### Directions

1. Please complete (1) one form for each position available at your organization.
2. Send all forms to [hfma@foodsofhawaii.com](mailto:hfma@foodsofhawaii.com) or mail to: 2800 Woodlawn Dr. #101, Honolulu, HI 96822
3. Deadline to submit form for Fall 2015 Semester placement is May 1, 2015.

### Site Information

Organization Name: \_\_\_\_\_ Internship Position: \_\_\_\_\_  
Contact Person: \_\_\_\_\_ Location: \_\_\_\_\_  
Contact phone: \_\_\_\_\_ Supervisor name: \_\_\_\_\_  
Contact E-Mail \_\_\_\_\_ Supervisor phone: \_\_\_\_\_

### Internship Information

Project description: \_\_\_\_\_

Duties assigned to intern: \_\_\_\_\_

Services intern will provide: \_\_\_\_\_

Learning objectives (list): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Desired start date: \_\_\_\_\_