



KDKA-TV/WPCW-TV  
420 Fort Duquesne Blvd., Suite 100  
Pittsburgh, PA 15222

Thank you for your inquiry about the KDKA-TV/WPCW-TV Internship Program.

KDKA-TV/WPCW-TV will be conducting internship interviews for the 2012 Summer and Fall semesters on Monday, March 12, 2012.

The interviews will be held on that day only at Two Gateway Center, 603 Stanwix Street, Suite 400, Pittsburgh, PA 15222.

The welcome and introduction will begin promptly at 10:00AM (registration begins at 8:45AM).

Previous interns will not be permitted to do a second internship.

Candidates must be a College Junior or Senior (i.e. have completed their sophomore year by the beginning of the internship) to be eligible and must be receiving college credit for the internship.

There are no paid positions in the program and you must be receiving college credit for the internship.

Please bring **four (4) copies** of each the following with you when you come in for an interview.  
**DO NOT MAIL THESE FORMS TO THE STATION. ANY STUDENT WHO SHOWS UP WITH INCOMPLETE OR MISSING PAPERWORK WILL NOT BE PERMITTED TO INTERVIEW ON THIS DATE.**

1. Completed Application
2. Completed Faculty Sponsor Questionnaire along with their Letter of Recommendation
3. Letter of Recommendation from a previous internship supervisor or from an employer
4. Resume with Cover Letter
5. Writing Sample (a short paper already submitted to class or an essay on "The Value of an Internship" is acceptable)
6. Transcript





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**Faculty Sponsor Questionnaire**

**\*\*\*PLEASE ATTACH A LETTER OF RECOMMENDATION\*\*\***

**Student's Name:** \_\_\_\_\_

**Number of credits student will receive for the internship:** \_\_\_\_\_

**One (1) credit =** \_\_\_\_\_ **hours**      **Total internship hours:** \_\_\_\_\_

*(Internships will not be provided unless the student receives credit for that internship).*

**What will the student submit as evidence of the field study accomplished at our station?**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
**(Signature of Faculty Sponsor) (College/University)**

\_\_\_\_\_  
**(Please print Sponsor's name) (Title/Department)**

\_\_\_\_\_  
**(Address)**

\_\_\_\_\_  
**(City, State and Zip)**

\_\_\_\_\_  
**(Area code and phone number)**

**\*\*\*PLEASE ATTACH A LETTER OF RECOMMENDATION\*\*\***