



Be Legendary.™

OPERATION INTERN STUDENT APPLICATION

ND DEPARTMENT OF COMMERCE
SFN 59336 (03/19)

Thank you for your participation in the Operation Intern program. Please provide the information on the intern or apprentice that you have hired and submit to the North Dakota Department of Commerce within two weeks of the start date.

Company Name	Students Name (First-Middle-Last)
Internship Location	NDUS Student ID Number
Internship Title	Email
Program of Study	Date of Birth
School	Year in School
Start Date (approximate)	End Date (approximate)
Learning Outcomes (What will the student learn and demonstrate through examples of their work?)	

Please send to:
North Dakota Department of Commerce
Attn: Jennifer Dahl, Program Manager
1600 E. Century Avenue, Suite 2
P.O. Box 2057
Bismarck, ND 58502-2057
Fax: 701-328-5320
Email: opintern@nd.gov

If student is attending an out of state school, please email Jennifer Dahl, the program manager, prior to submitting this form to confirm their eligibility for the program.