

Mississippi Press Association Education Foundation
INTERN ASSISTANCE PROGRAM
Job Description Form

Title of Intern Position _____

Rate of Pay (excluding Foundation's Stipend) _____

Number of weeks to receive the \$100 stipend _____

Period of internship _____ to _____

Duties during internship _____

Qualifications/Skills required _____

Newspaper Name _____

Supervisor _____ Title _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

RETURN WITHIN FIVE WORKING DAYS

Please complete and return to MPAEF Internships, 371 Edgewood Terrace,
Jackson, MS 39206 or fax to 601-981-3676