Please complete this application and return it to the Career Development Center; 2nd Floor SUB. For questions regarding your application, call the Career Development Center at (206) 281-2485.

Name: ________________________________ Date: ________________

Year in School: ________________________ Major: ________________________

Phone: ( ) ____________________________ Email: ________________________

Briefly describe why you are interested in participating in a job shadow experience: ________________

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__________________________________________________________________________

__________________________________________________________________________

Describe the type or specific name of company/organization you would like to learn about:

__________________________________________________________________________

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