

Mission:

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.



Ron DeSantis
Governor

Joseph A Ladapo, MD, PhD
State Surgeon General

Vision: To be the **Healthiest State** in the Nation

INTERNSHIP APPLICATION

Personal Information

Name: _____
(Last) (First) (Middle)

Address: _____
(Number and Street) (Apt., Suite, Etc.)

(City) (State) (Zip Code)

Phone # (cell): _____ Alternate: _____

E-mail address: _____

Education

School: _____ Division: _____

Degree Seeking: _____

Requested Internship Duration: From ____/____/____ To ____/____/____ # hour / week: _____

Professor/School contact: _____ Telephone: _____

Select the department(s) of interest to you (check all that apply): See our website for additional information <http://brevard.floridahealth.gov>

- | | |
|---|---|
| <input type="checkbox"/> Dental | <input type="checkbox"/> Environmental Health (Septic, Facilities, Water) |
| <input type="checkbox"/> Epidemiology | <input type="checkbox"/> Immunizations |
| <input type="checkbox"/> Medical Records | <input type="checkbox"/> Nursing |
| <input type="checkbox"/> Women, Infants, and Children (WIC) | <input type="checkbox"/> Public Health Preparedness |
| <input type="checkbox"/> Tuberculosis Control | <input type="checkbox"/> Other - please specify _____ |

Please attach any related documents, if applicable, to this application. If you have not heard from us within two weeks, please contact our Personnel Liaisons at 321-454-7151.

For Office Use Only

Date application received: _____

Approved: _____ Preceptor/Program: _____ / _____