

Internship Application Form



1. First read the Internship Information to understand the process and your responsibilities.
2. Then complete this form and submit it to your program coordinator.
3. After your program coordinator approves the internship, they will submit this form to Academic Services. You will be notified once you have been registered for your internship.

| INTERNSHIP DETAILS | | |
|---|-----------------------------|---------------|
| Course Code | Course Title | |
| Start Date | Completion Date | |
| If you are applying for a summer internship , to which semester would you like to have this course charged? <input type="checkbox"/> Charge fee to Summer semester <input type="checkbox"/> Charge fee to Fall semester | | |
| STUDENT INTERN INFORMATION | | |
| Last Name | First Name | Student Box # |
| Address | | |
| Email | Telephone | |
| Credit hours completed before starting internship | Year of intended graduation | |
| FACULTY SUPERVISOR INFORMATION | | |
| Name | | |
| Address | | |
| Email | Telephone | |
| INTERNSHIP SUPERVISOR INFORMATION (if different from Faculty Supervisor) | | |
| Name | | |
| Title | Organization | |
| Address | | |
| Email | Telephone | |
| | Fax | |

Contract Statement

We, the undersigned, agree to the following:

- A. We plan to work together to fulfill the contracted requirements of this agreement as specified in the Internship Proposal. This proposal may be adjusted or amended with the mutual agreement of the Intern and her/his supervisor(s).
- B. We have reviewed the relevant documents and understand the purposes of the Internship.
- C. The supervisor(s) will provide the intern with supervision and guidance so the intern's personal development and skills will be enhanced by the Internship.
- D. The supervisor(s) will meet regularly with the intern for encouragement, reflection, and accountability.
- E. This internship may be terminated if two or more parties (Intern, Faculty Supervisor, Internship Supervisor, Program Coordinator) agree to the same.
- F. The Internship Supervisor agrees to complete the Internship Supervisor's Evaluation (if applicable) and to submit it to the Faculty Supervisor prior to the deadline (mm/dd/yy): _____.
- G. The Intern agrees to fulfill the requirements as outlined in his or her Internship Proposal.
- H. The Program Coordinator will provide a copy of this form and contract to Academic Services and will ensure that the Faculty Supervisor, Internship Supervisor, and Intern have received copies.**

Signatures

| | | |
|-----------------------|-------|------------|
| Intern | _____ | Date _____ |
| Internship Supervisor | _____ | Date _____ |
| Faculty Supervisor | _____ | Date _____ |
| Program Coordinator | _____ | Date _____ |