

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 _____