

International Relations Department Graduate Internship (INTL 6500) Approval Form

Who should use this Form

Graduate International Relations students who wish to conduct an internship for university credit.

Important Information

This form confirms that your supervisor approves of your proposed internship project and is committed to supervising it.

How to Submit

Please submit this completed and signed form along with your project proposal to the department coordinator.

STUDENT INFORMATION			
Student Name			Student ID
Student E-Mail			

INTERNSHIP INFORMATION			
Internship Institution			
Company Name			
Company Address			
Internship Position Information			
Position			
Duration		Hours per Week	
Internship Supervisor			
Name / Position			
Email		Phone:	
Academic Supervisor			
Name			
Email			

PROJECT PROPOSAL CHECKLIST
<p>My Internship Project Proposal includes the following required components. Your supervisor may ask you to submit more than what is listed below.</p> <ul style="list-style-type: none"> <input type="checkbox"/> A description of the position and the organization you will intern at <input type="checkbox"/> A statement about why this internship is beneficial to your academic education <input type="checkbox"/> A detailed work-plan including your academic and practical objectives and expected results

GUIDELINES & DEADLINES

I have read and understood the Departmental Internship Guidelines and am aware of the deadline(s).

I understand that I will be evaluated with the same academic rigor for this internship as I am in any other course. Being aware that my performance at this internship will also reflect upon the University, I will strive to act in a professional manner.

Student Signature		Date:
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APPROVAL SIGNATURES

Academic Supervisor		Date:
Internship Supervisor		Date:
Department Head		Date: