

PADM 6500 Student Internship Details Form

(to be completed, SIGNED by the student, and sent to Dr. Streams at mstreams@tnstate.edu prior to beginning the internship)

Student's name:

Student's preferred email:

Student's preferred phone number:

Agency name, website and address:

Immediate supervisor name, job title and contact information *(please include email and phone number)*

Duration of internship and planned schedule *(for example: "300 hours from May 1 to July 15, 20XX (10 weeks); 20 hours per week")*

Nature and purpose of internships project(s) *(summary)*

When submitting this form to the internship coordinator/Dept. Chair, please also include as a separate attachment the following document:

- An award letter or official correspondence from the internship agency concerning your internship role or projects for which you will be responsible; if not already detailed in that letter, please also include a current job description for your internship role approved by your immediate supervisor or other agency representative.

NOTE: Student is responsible for the following deliverables to be completed by one week prior to the last day of finals in the semester credits are sought:

- Student Employment LOG to be maintained on a daily basis throughout the internship. See PADM6500 syllabus for details.
- Self-Reflection PAPER See PADM6500 syllabus for details.
- Ensure that agency supervisor completes the final evaluation form and emails directly to internship coordinator/Dept. Chair by that same date

Student signature _____

Date _____