

# PORTLAND STATE UNIVERSITY

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## College of Urban and Public Affairs Masters of Urban and Regional Planning

### INTERNSHIP INTEREST FORM

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_ E-mail: \_\_\_\_\_

Field Specialization: \_\_\_\_\_

Faculty Adviser: \_\_\_\_\_

Number of terms completed in MURP: \_\_\_\_\_ Credits enrolled this term: \_\_\_\_\_

Anticipated degree completion date: \_\_\_\_\_ Plan date to begin internship: \_\_\_\_\_

*(Use a separate sheet and/or the reverse side of this form if needed to complete the items below.)*

Describe area of interest for internship experience: \_\_\_\_\_

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Describe specific objectives for the internship experience (i.e. skills, experience, etc.):

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Describe your qualifications for internship (skills, interests, associations, etc.):

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Specify special considerations desired (i.e. pay, hours/week, location, etc.):

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