

**ESM 404
Plan for Internship**

Student's Name:

PSU ID Number:

Major:

PSU Email:

Term of Internship:

ESM 404 Credits Requested:

ESM Faculty Mentor's Name:

ESM Faculty Mentor's Email:

Supervisor:

Phone Number:

Title of Supervisor:

Supervisor's Email:

Supervising Organization/Place of Internship: _____

Organization/Place of Internship Address: _____

Dates and Duration of Internship: _____

Intern Position Title: _____

I agree to prepare a detailed final written report explaining my internship activities to include any criticism of the program and suggestions for improvement. The report will be submitted to the ESM Faculty mentor.

Student's Signature

Date

The cooperating organization agrees to extend to the student an opportunity to obtain actual experience in the areas outlined in the attached narrative. The student's immediate supervisor will be _____, who agrees to evaluate the efforts of the student and forward an evaluation to the Environmental Science & Management Department's Faculty Mentor within one week of completion of the intern's work activities.

Internship Supervisor's Signature

Date

Portland State University, through the Environmental Studies Program, agrees to grant credit hours for ESM 404 to the student upon satisfactory completion of this internship.

Faculty Mentor's Signature

Date

***Attach narrative describing specific learning objectives and responsibilities.**

Return signed copy to:

**ESM Department, 218 SRTC
Environmental Science & Management
Portland State University
P.O. Box 751, Portland, OR 97202-0751**