

STUDENT INFORMATION (Completed by Student)

## Approved Internship Agency Interview

The student listed below is interested in getting your agency approved for Internship with our program. We would appreciate it if you could complete the agency information and return to the student or the Senior Seminar Instructor.

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Date Submitted:		
Semester of Internship Fall/Term _	Spring/Term	Summer/Term
Name:	FSU Ema	il address:
Address:		
City:	State:	Zip Code:
Telephone: Home:	Cell:	
List the factors most important to y	your internship placement:	
What are your goals for an internsh	ip with this agency?	
Signature of Student		
AGENCY INFORMATION (Complete	ed by the Agency)	
Name of Agency:		
Address:		
City	Stato:	Zin Codo:

Agency Website:		
Agency Internship Supervisor:		
Position:		
Provide a brief list of the student's learn	ing opportunities for this int	ernship:
List any wages, stipends or other compe	ensation benefits:	
Note any unique position requirements be aware of, but must agree to, in order		se that a student intern might otherwise not nce.
	interviewing at more than or	e indicated below whether I will accept the ne agency and final acceptance on their part
The agency accepts the student for	or internship. The agency	does not accept the student for internship
Supervisor's signature:		

Mailing address:

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