

ESP Internship Approval Form

(This form is for students requesting approval of their proposed internship.
This form must be approved **prior** to starting an internship)

Your Name: _____

Date: _____ Phone: _____

E-mail: _____

Internship Host
Agency/Organization: _____

Address: _____

Host Supervisor (including title): _____

Host Phone: _____ Host E-mail: _____

Internship Start Date: _____ Stop Date: _____ Total Expected Hours: _____

Complete the following questions in an attachment based on your expectations of the internship.

1. What specific duties will you perform during the internship?
2. What is the level of supervision? Working alone, with crew, etc?
3. Location of internship?
4. How will this internship incorporate your course work, enhance your career goals, and strengthen your skills in your chosen ESP concentration?

Attach the following to the form:

- A copy of your typed resume.
- A copy of a cover letter.
- A written job description signed by the host supervisor.

Your Signature: _____ Date: _____

USM ESP Faculty Advisor's Signature: _____ Date: _____

USM ESP Internship Coordinator's Signature: _____ Date: _____

Internship Site Supervisor Signature: _____ Date: _____
(or provide separate consent letter/email)