

Supervisor's/Manager's Intern Request Form

Supervisor's/Manager's First and Last Name

Location (address)

Telephone Number

Fax Number

Email Address

Department or Division

Description of Department or Division

Internships

Is this a paid internship?

Yes

No

How much per hour?

_____/hour _____ flexible

How many work hours are required per week?

Are these hours flexible?

Yes

No

Description of Position or Project

(It is understood that interns have a variety of responsibilities, but please be as complete as possible.) (Attach description)