MINNESOTA STATE UNIVERSITY, MANKATO

RECREATION & PARKS LEADERSHIP STUDIES

APPLICATION FOR SENIOR INTERNSHIP

Faculty Signature / Date: _____

Students should complete and submit this form to your Faculty Advisor for approval. Once you have received approval, the Faculty Advisor will send one copy of the form with a letter to your Agency Supervisor. Be sure to take the time to write out thoughtful objectives that will be measurable and that relate to your RPLS coursework.

Name			
Starting Date is:	Ending Date is:		
My address during my internship:			
Street:			
City:	State:	Zip:	
My phone # during my internship:			
My MSU e-mail address:			
Name of the Agency where I will be doir	ng my Senior Interns	ship:	
Agency Street Address:			
City:	State:	Zip:	
Supervisor's name/title:			
Supervisor's phone #:			
Supervisor's e-mail address:			
The objectives I hope to achieve during t	his Senior Internship	o include: (list 5)	
1)			
2)			
3)			
4)			
5)			