University of Wisconsin-Milwaukee

Department of Geography, Geog 489: Internship Agreement Form

1 STUDENT INFORMATION:

Name of student		ID number
Street Address		Phone
City, State, Zip		Email@uwm.edu
Major track	Cumulative gra	nde point average
2. INTERNSHIP INFORMATION:		
Semester enrolled	Year	Credits to be earned
Department Geography	Faculty internship supervisor	
Who located the internship?	Paid/unpaid? _	If paid, hourly rate: \$
Agency where internship will take pla	ace:	
Agency internship supervisor name:		
Email:		Phone:
3. REQUIRED SIGNATURES: Student		Date _
Agency internship supervisor		Data
Faculty internship supervisor		Date
Dept. Geography Chair After signing, the Chair will make a Geography records. If the student ne	copy of this form for the student and	

student should indicate a preference for later collecting a paper copy from Dept. Geography main office, or for a copy to be mailed, or for a digital scan of the document to be emailed.

Evaluation: The student's performance in this course will be evaluated by the faculty internship supervisor, the agency internship supervisor, and two written assignments. One assignment is an evaluation form on the agency and the internship experience. The second assignment is a research paper on a topic involving the work conducted during the internship related to a body of academic/public policy literature, based on prior consultation with the faculty internship supervisor.