Turn in this form with your internship documents

Student: ___________________________ Dates of Internship: ___________________________

Internship Location: ___________________________ Total hours completed: _______

Supervisor: ___________________________ Position or Title: ___________________________

1. Summary of duties and activities during the internship:

2. Project for which you had principal responsibility:

3. Summarize opportunities you had to learn about institution as a whole:

(attach additional sheets as necessary)

Museum Studies Office Checklist

Internship Approval □ Date Approved: ___________________________

 Internship Documents Date Received: ___________________________

 Internship Journal □

 Internship Portfolio □

 Internship Report □

Student Evaluation □ Date Received: ___________________________

Supervisor Evaluation □ Date Received: ___________________________

Hour requirement met □