MS Practicum Experience <u>INTENT</u> Form Graduate Program in Environmental Sciences

The student must register for ESCI 614V Environmental Sciences Internship when performing the internship and again during the semester of intended graduation. This form must be completed the semester prior to starting the internship. The student must register for a total of 6 credit hours.

Name of Student (Print)	Student's Current Address	Anticipated Year of Graduation	
Student Specialty Area			
Name of Research Advisor (Print)			
The Practicum Experience will occur in:	Fall Semester Spring Seme	ester Summer Semester	
Year	Approximate Practicum Start Date	Practicum Location	
Number of Credits ESCI 614V			
PRACTICUM SUPERVISOR INFORMATI	ON		
Name of Practicum Supervisor (Print)	Signature	Date	
Name of Agency/Organization	Phone No. E-Mail Address		
Address		FAX Number	
Reason for selecting internship location	n:		
Brief Outline of Practicum Goals:			

Form #7 EVS MS Practicum Experie	ence Intent Form	EVS Rev. 06-19	Student ID Number:	
Brief Outline of Practicum Outcon	nes:			
PLEASE READ CAREFULLY				
The Environmental Sciences Progra he proposed practicum experience. about your placement which is deem	In addition, the E\			
Student Name (Print)	Signature		 Date	
PRACTICUM EXPERIENCE INTEN	T APPROVAL			
Research Advisor (print)	Signa	ature	Date	
Committee Member (print)	Signa	ature	Date	
Committee Member (print)	Signa	ature	Date	
Committee Member (print)	Signa	ature	Date	
Committee Member (print)	Signa	ature	Date	
Additional Member (print)	Signa	ature	Date	
Program Director (print)	Signa	ature	Date	

Signature

Date

Dean, Graduate School (print)