

**Student Internship Contract**  
**Department of Political Science**  
**University of Wyoming**

**CONTACT INFORMATION (Student)**

**Student Name:** \_\_\_\_\_

**Address (current):** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Number of credit hours in POLS expected (1-6 hours):** \_\_\_\_\_

**INTERNSHIP INFORMATION**

**Name of agency/institution/company:** \_\_\_\_\_

**Business Address/Location:** \_\_\_\_\_

**Expected start date:** \_\_\_\_\_

**Expected end date:** \_\_\_\_\_

**Number of hours expected to work per week:** \_\_\_\_\_

**Contact person at agency/institution/company or direct**

**supervisor:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

## **INTERNSHIP INFORMATION**

**Please describe fully (attach an additional sheet if necessary) the intern's duties and responsibilities:**

**Describe fully the goals of the internship:**

**What are the reasons/benefits for completing this internship?**

**I agree to fulfill the work commitment for the internship stated in this contract. In addition, I agree to complete all required coursework as necessary to receive internship credit through the Department of Political Science.**

**Student signature:\_\_\_\_\_date:\_\_\_\_\_**

**Please return completed and signed form to Dr. Andrew Garner, Department of Political Science, Arts and Sciences 136 or email electronic version to [agarner1@uwyo.edu](mailto:agarner1@uwyo.edu)**