**Kinesiology and Health Graduate Student Internship Application Form**

Student name: W#: Date:

Which semester are you going to perform the internship?

Internship site: Internship site supervisor:

Supervisor phone number: Supervisor email:

Supervisor mailing address:

Credits hours: Number of contact hours (#credits x 40 hours) =

Start date: End date (must be by the end of the semester):

What is the reason you have chosen your internship site, and what do you expect to learn from this experience?

Other supporting documents:

Please obtain approval from your K&H advisor before you submit this application form.

Please attach a copy of your BLS/CPR certification card.

Please attach a copy of your background check payment verification. The background check is to be completed the semester prior to the start of your internship.

Student acknowledgment. I understand that to satisfy the KIN 5990 Internship, I must complete the following:

1. I must submit this internship application form one semester before the start of the internship.
2. I must complete the minimum number of contact hours within the stated dates at the indicated internship site.
3. I must report internship hours twice (midterm and final) through WyoCourses.
4. I must inform my internship site supervisor to complete two evaluations (midterm and final) through the K&H graduate student website.
5. I must perform satisfactorily in the opinion of my internship site supervisor to receive a satisfactory grade for KIN 5990.

By my signature below, I acknowledge that I have read and agree to the above-listed conditions and that my questions have been answered satisfactorily.

Student signature: Date: