

Internship Report Form

Hart Career Center – Internship Program

Experience the Possibilities

Congratulations on your Internship position! Thanks for sharing information with our office. This helps with future internship development and allows us to be of better service to IWU students.

Name _____ Address _____ City _____ Zip _____

Student Phone _____ Student e-mail _____

Class status (during Internship experience, F/So/Jr/Sr): _____ Graduation date _____

Term of Internship (x all that apply): __ Fall 20__, __ Spring 20__, __ May 20__, __ Summer 20__,

The Internship is: __Not for Credit, __For Credit from _____ Department.

INTERNSHIP ASSIGNMENT

Name of Organization: _____	
Mailing Address: _____	
On-site Supervisor Name and Title: _____	
Phone: _____	Email: _____
INTERNSHIP POSITION: _____	
Date Internship Begins: _____	Date Internship Ends: _____
	Number of on-site hours/week: _____
Will you receive any financial compensation? __Yes __ No If yes, please specify wages _____	
How did you find out about this internship? _____	

THANKS for filling us in! Enjoy your Internship Experience.
The Hart Career Center

Return to: Laurie Diekhoff, Assistant Director/Internship Coordinator, diekhoff@iwu.edu
Hart Career Center, Illinois Wesleyan University, PO Box 2900, Bloomington, IL 61702-2900 (309) 556-3071

For Office Only:

Internship Report _____ eRecruit _____
Date/Initials Date/Initials