

# UConn Digital Media & Design Internship Form

Course# DMD 4081 Term: \_\_\_\_\_

Student Name: \_\_\_\_\_ ID #: \_\_\_\_\_

Student Email: \_\_\_\_\_

Is this an internal (to UConn) or external internship? (check box)  UConn  external

Is this your first internship (check box)  yes  no (if no, list semester of other \_\_\_\_\_)

## Internship Site Information

Company/Department Name: \_\_\_\_\_

Site Address: \_\_\_\_\_

Primary Contact / Supervisor Name: \_\_\_\_\_

Supervisor's Title: \_\_\_\_\_

Supervisor's Email: \_\_\_\_\_

Anticipated Start Date: \_\_\_\_\_ Anticipated End Date: \_\_\_\_\_

Anticipated average hours at site per week: \_\_\_\_\_

Total hours worked during term: \_\_\_\_\_ Pay Rate (\$/hr or salary): \_\_\_\_\_

Description of position (duties and responsibilities): \_\_\_\_\_

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*I agree that the description, hours, and rate are accurate and will mentor the student.*

Supervisor's Signature: \_\_\_\_\_

## Approved By:

Faculty Advisor: \_\_\_\_\_

Department Head: \_\_\_\_\_

Total Internship Credits: \_\_\_\_\_