

This sheet should be given to your teacher as soon as your internship/project is secured. It must be completely filled out.

## Senior Seminar: Internship Information

Student Name: \_\_\_\_\_ Student e-mail: \_\_\_\_\_

Mentorship Description: \_\_\_\_\_  
\_\_\_\_\_

Company/Organization (if applicable): \_\_\_\_\_

Mentor First and Last Name: \_\_\_\_\_

Mentor Phone Number: \_\_\_\_\_

\*Mentor e-mail: \_\_\_\_\_

Address of internship: \_\_\_\_\_

Dates and times of internship (if known): \_\_\_\_\_  
\_\_\_\_\_

\*REQUIRED for teacher contact

### Signatures

1. I agree to be mentor for the above named student. I understand that I am required to fill out 2-3 assessments of my student as described in the Mentor Handbook.

Mentor signature: \_\_\_\_\_

2. I approve of my son/daughter's Senior Seminar project/internship and I understand the requirements of this course.

Parent/guardian signature: \_\_\_\_\_

Parent/guardian email: \_\_\_\_\_

3. I have read the handbook and understand the requirements of this course.

Student signature: \_\_\_\_\_

**THIS SHEET MUST BE COMPLETED BY THE FIRST WEEK  
OF SECOND SEMESTER.**