

## PSY 391 Internship Proposal

### *General Information*

1. Name	
2. CSU ID	
3. Email address	
4. Name of Internship Site	
5. Name of Site Supervisor:	
6. Name of CSU Faculty Supervisor:	
7. Number of desired credit hours:	
8. General goals/objectives for the internship:	
9. Specific activities anticipated for the internship experience:	

*Rationale: Please answer as specifically as possible.*

10. How will the internship activities relate to psychological knowledge and skills?
11. How will the internship be relevant to your (potential) future employment settings?

**12. What is the site supervisor's role in the internship? Clearly define and include the supervisor's anticipated interactions with you and the anticipated schedule of meetings with you (brief weekly meetings, and brief mid-semester and end-of-semester evaluations of the intern, are strongly suggested).**

**13. What is the Psychology Department faculty member's role as a supervisor? This role must be significant. This role can vary depending on the situation, but at the minimum it should include periodic communications or meetings with the student and site supervisor, as well as evaluation of your final paper.**

**14. How will your course grade be determined? The evaluation criteria utilized must be explicitly described, as well as how the faculty and site supervisors' evaluations will be weighted in determining your final grade.**

**I approve and agree to the following information presented above. I also grant permission for the Undergraduate Psychology Committee (UPC) to review the above information to ensure appropriateness of the internship, goals, activities, etc.**

Student Name

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Student Signature

X

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Date

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**CSU Faculty Supervision Agreement**

I, \_\_\_\_\_ agree to participate and serve as the student's CSU faculty supervisor at for their internship at \_\_\_\_\_. I have read over the information above and approve of the internship, the allotted credit hours, and all remaining information.

CSU Faculty Supervisor Name

\_\_\_\_\_

CSU Faculty Supervisor Signature

X  
\_\_\_\_\_

Date

\_\_\_\_\_

**Site Agreement (Must be signed by site supervisor)**

I, \_\_\_\_\_, agree to serve as the students site supervisor at  
\_\_\_\_\_. The internship site will provide the resources, equipment, and  
facilities necessary to support the learning objectives/goals of the internship. I agree to facilitate  
provision of these resources. I have read and approve of the information presented above.

Site Supervisor Name

\_\_\_\_\_

Site Supervisor Signature

X  
\_\_\_\_\_

Date

\_\_\_\_\_