



TEXAS A&M UNIVERSITY

Biology

BIOLOGICAL INTERNSHIP PROGRAM

Department of Biology
College of Science
Texas A&M University
107 Butler Hall
College Station, TX 77843-3258

Student's Name _____ UIN _____

Student Email _____

Local Address _____

Local/Mobile
Phone _____

Home Address _____ Phone _____

City State Zip Code

Faculty Mentor _____

Credit Hours Completed to Date _____ Cumulative Grade Point Average _____

Supervising Entity (agency, company, practice, etc.) _____

Entity's Address _____
Street

City State Zip Code

Entity Contact Phone Number _____

Type of Entity

Date and Duration of Internship

Title of internship position:

Internship Responsibilities

Number of Credit Hours to Receive

I agree to prepare a detailed, type-written, final report explaining my internship activities and to include any suggestions for improvement of the program. The report is to be submitted to the academic advisor. I will submit the report by _____ (Date)

Student's Signature

I have reviewed this Plan for Internship and find it consistent with the student's educational objectives.

Academic Advisor

Date

The cooperating agency agrees to provide the student an opportunity to obtain actual experience in the areas outlined above. The student's immediate supervisor will be

Name

Title

who agrees to evaluate the efforts of the student and forward an evaluation to the academic advisor on termination of employment.

Representative of
Cooperating Entity

Date

Street Address

City

State

Zip Code

Business Phone
