

Internship Exit Form

Please send to MPA Internship Coordinator prior to leaving your internship:

Name: _____

Date Internship ends: _____

Address after completing internship*:

Telephone: _____

*Note: If you do not know your new address and phone number, please send it to us as soon as you know. But for now, please give us an emergency phone number such as a relative's or friend's who knows where you are:

Emergency phone number: _____

Thanks.

COMPLETION OF INTERNSHIP REQUIREMENTS

The student has completed all of the required tasks for the internship including journal submissions, submission of an annotated outline or draft of the presentation to the faculty advisor, discussion with the faculty advisor about the presentation, and informing the faculty advisor of the date, time, and location of the presentation which the advisor must attend.

Student Signature

Faculty Advisor Signature

The student file is complete with copies of the internship cover sheet, learning contract, student's internship evaluation form, agency internship supervisor's evaluation form, and completion of the internship requirements form.

Student Signature

Internship Coordinator Signature

**PLEASE RETURN TO THE MPA INTERNSHIP COORDINATOR NO LATER
THAN THREE WEEKS BEFORE INTERNSHIP PRESENTATION DATE**