**Brentwood UMC Internship Proposal**

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| **Department:** |  | **Date Requested:** |  |
| **Supervisor:** |  |
| **Student’s Name:** |  |
| **Address:** |  |
| **E-mail:** |  | **Phone:** |  |
| **Name of Institution Enrolled or Graduated From:** |
|  |
|  | **Proposed:** | **Approved:** | **Approved by: (Initials)** |
| **Semester:** |  |  |  |
| **Number of Hours:** |  |  |  |
| **Compensation:** |  |  |  |
| **Funding Source for Internship:** |
|  |
| **Summary of Activities to be Performed:** |
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| **Learning Goals:** |
|  |
| **Methods for Evaluating Work:** |
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| **Department Head:**  | (Type Name Here) | **Executive Director/Pastor:** | (Type Name Here) |
| **Signature:** |  | **Signature:**  |  |
| **Date:** |  | **Date:** |  |