

SUST 3002.03 Application Form



College of Sustainability

Term: Fall Winter Spring/Summer **Year:** _____

Student	
First Name: _____	Last Name: _____
Student ID: _____	
Telephone: _____	Email: _____

Host Organization: _____ **Contact:** _____
Telephone: _____ **Email:** _____

Internship Coordinator: Debra Ross	Department: College of Sustainability
Email: debra.ross@dal.ca	Telephone: 494-7805
Academic Supervisor: Peter Mushkat	Faculty: ENVS /College of Sustainability
Email: pwm@dal.ca	Telephone: 494-8056

Job Title: for intern (if applicable): _____

Work schedule: _____

Duties to be performed / description of research project: (attach separate sheet if required):

Expected outcome of internship (attach separate sheet if required):

Grade Weighting (to be established prior to the internship):

Requirement	Grade Weighting (no element less than 10%)
Reflection Paper	
Public Presentation	
Project Journal	
Host Organization Evaluation	
Total	100%

Your signature signifies that you have read the internship guidelines and that you have agreed to the terms and expectations associated with the College of Sustainability Internship.

Student: _____ **Host:** _____

Date: _____ **Date:** _____