# APPENDIX G: INTERNSHIP PLAN APPROVAL FORM

Intern: Date:

University Supervisor (please print)

I have read the internship plan for the intern named above   
and (check one):

🞎 I approve the plan unconditionally

🞎 I approve the plan conditionally (see requirements on reverse or attached)

🞎 I do not approve the plan

University Supervisor:

(signature)

Site Supervisor (please print):

I have read the internship plan for the intern named above   
and (check one):

🞎 I approve the plan unconditionally

🞎 I approve the plan conditionally (see requirements on reverse or attached)

🞎 I do not approve the plan

Site Supervisor:

(signature)

Intern:

(signature)