



Graduate Student Application for Internship (Form GSA)

School of Public Affairs and Administration
Western Michigan University
220 E. Walwood Hall
Kalamazoo, MI 49008-5440
(269) 387-8930

Student Name _____

Date _____

Mailing Address _____

City _____

State _____

Zip _____

Telephone Number _____

E-mail Address _____

Organizations/Agencies preferred for internship in order of preference (include location if applicable)

1. _____

2. _____

3. _____

4. _____

Number of MPA Credit Hours completed: _____ GPA _____

Semester Electing for Internship _____

In order to fulfill the internship requirement, I will require the following special accommodations:

I will be/I am enrolled to receive course credit for my internship through: _____

Please check off if updated resume is attached:

A salary or stipend is _____ not essential _____ essential



Professional Field Experience (Internship) PADM 7120 for Graduate Students

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Assessment of Current Strengths (knowledge, skills, values)

Assessment of Current Limitations (knowledge, skills, values)

Career Goals:

Experience desired during this internship:

This application will serve as a declaration of my intention to participate in the internship required for the fulfillment of my requirement in the MPA program, and as required in my approved course of study. I have met with my departmental academic advisor and have received approval as applicable for my degree program.

Student Signature

Date

PADM 7120 Professor Signature

Date