## THE UNIVERSITY OF GEORGIA ENVIRONMENTAL HEALTH SCIENCE

## PROFESSIONAL INTERNSHIP TRAINING AGREEMENT

(not a binding contract but a statement of agreement and understanding)

Student's Name:					
	Last		First		Middle
udents Mailing Ad	dress:				
	Number & Street				
	City		State		Zip
none:		Major:			
nployer:					
ddress:					
	Number & Street	(	City	State	Zip
ates of Internship:					
erm: Ü	Fall	Spring	Summer	Year	
redits:					
ucational objectives	s:				
teria for performa	nce evaluation:				
ily hours of work _ muneration employ e undersigned agrees ties before the agree	er is to pay this to conform with	student (option this agreement	n. Days per week  al) and two weeks no	:otice must be gi	ven to all three
ned					
iicu					
	er		Date _		
	er		Date _		
ooperating Employ	er 		Date _		
ooperating Employ tudent Internee	er				