



Student Name: \_\_\_\_\_

Semester/Year: \_\_\_\_\_ Fall  Spring  Summer

**(Separate packets needed for each semester/session)**

Dept. of Business Administration

**Internship Package Cover Sheet**  
**BUS 390 – Internship in Business**  
**(To be completed by supervising faculty member)**

**PLEASE READ THE ATTACHED INTERNSHIP PROGRAM STUDENT INSTRUCTIONS**

All items listed below must be attached to your internship packet before submitting it to the Department of Business Administration – DF 236. Forms are located at <https://www.kutztown.edu/DBAInternships>

- Internship/Field Experience Registration Approval form
- Internship/Field Experience Site Approval form
- Signed Employer Confirmation Form.
- Printed job description either from KU Career Network or the employer.
- Student’s resume.
- Student’s unofficial transcript (provided by internship faculty supervisor).
- BUS 390: Internship Assessment Agreement form.

**PLEASE DO NOT SUBMIT AN INTERNSHIP APPLICATION PACKAGE UNLESS ALL ITEMS LISTED ABOVE ARE COMPLETED, SIGNED & ATTACHED**

Have you verified the internship with the internship supervisor?	_____ YES _____ NO
Is the company on the pre-approved Internship Agreement Listing?	_____ YES _____ NO
Will student have completed 60 credits by start of internship?	_____ YES _____ NO
As of now, student has met all academic requirements. (2.0 GPA in the major and a 2.0 GPA overall; <b>completion of 21 credits in business</b> )	_____ YES _____ NO
If student does not meet the above academic requirements, is the student currently enrolled in the appropriate course(s)?	_____ YES _____ NO
Has the student had an employment relationship with the company where the internship placement is going to be?	_____ YES _____ NO

*If YES, on a separate sheet describe how the job duties will be substantially different.*

I hereby certify that the required information is included and complete and agree to abide by the current internship policy document:

Faculty Supervisor Signature: \_\_\_\_\_ Date \_\_\_\_\_

Business Administration Department Chair Signature: \_\_\_\_\_ Date \_\_\_\_\_