

FORM I
INTERNSHIP AGENCY QUESTIONNAIRE

*MS Word document at <http://www.wiu.edu/coehs/leja/fire/index.php> current students, internship forms

1. Name of Agency: _____
2. Name of Coordinator: _____
E-Mail Address _____
3. Agency Address: _____
Number Street
City State Zip
4. Phone: _____ Fax: _____
(Area) Number Extension (Area) Number
5. Name of person in agency to contact if coordinator is not available: _____
E-Mail Address _____
Name: _____ Phone: _____
6. What function or activities of your agency do you think will be especially beneficial for students to observe and/or participate in?
7. If appropriate, what types of research activities would you let our students participate in while they are with your agency?
8. What is the best length of time for students to stay with your agency?
_____ weeks _____ weeks _____ weeks
Maximum Minimum Preferred
9. Maximum number of students who can be assigned to your agency at any given time: _____
10. Do you foresee any problems pursuant to the sex of the student? _____
Male Female
Explain: _____
11. List any unique requirements your agency has for the intern, i.e., agency waivers, special applications, dress code, specific hours, etc. _____

12. What is the population of your community? _____
13. How many individuals are employed by your agency? _____

*If you have any additional information that would be helpful to perspective intern candidates, please forward it with this completed form. This form and all internship materials (MS Word documents, text boxes) can be found at <http://www.wiu.edu/coehs/leja/fire/index.php> - Current Students, Internship Forms.
Thank you!

Form completed by: _____ Date _____