



Internship Data and Department Certification J-1 Student Intern

This form must be completed by the faculty supervisor.
Please type all information in the form. All fields are required.

Section 1: Student Intern Information

First Name: _____ Last Name: _____

Email: _____

Current Field of Study: _____ Degree: _____

Date Degree expected (mm/dd/yyyy, must be after internship ends): _____

Dates of internship (**Start date is the date by which the intern must enter the United States**):

From (mm/dd/yyyy): _____ To (mm/dd/yyyy): _____

Internship hours per week (must be at least 32): _____

Section 2: Department Information

Department Address: _____

Website URL: _____

Training/Internship Field (brief): _____

Receiving university funding? Yes No If yes, how much? _____

Section 3: Faculty Supervisor Information

Supervisor Name: _____ Phone: _____

Supervisor Title: _____ Email: _____

Section 4: Internship Information

Description of student intern's role for this program

Specific goals and objectives for this program

Please list the names and titles of those who will provide continuous (for example, daily) supervision of the student intern, including the primary supervisor. What are these persons' qualifications to teach the planned learning?

What plans are in place for the student intern to participate in cultural activities while in the United States?

What specific knowledge, skills, or techniques will be learned?

How specifically will these knowledge, skills, or techniques be taught? Please include specific tasks and activities.

How will the student intern's acquisition of new skills and competencies be measured?

Additional remarks (optional)

Section 5: Supervisor Certification

As the faculty sponsor and supervisor of the above-named student intern, I confirm the following:

- The internship will expose the student intern to American techniques, methodologies, and technology; will expand his or her existing knowledge and skills; and will not duplicate their prior experience. The internship will consist of work-based learning and not unskilled labor.
- The internship will be at least 32 hours per week and no more than 20% clerical work.
- The student intern will not displace an American worker or involve a staffing or employment agency.
- The responsibilities of the student intern will not include unskilled or casual labor, child or elder care, aviation, clinical work, or other patient care or contact.
- The internship does not exist to fill a labor need. The internship exists solely to assist the student intern in achieving the objectives of their participation in the program.
- I understand that the student intern is limited to a maximum duration of 12 months at this degree level and extensions beyond 12 months are not possible.
- The department will complete the ISSS evaluation process for the student intern. The final evaluation must be submitted within 15 days of the end of the internship and before the student intern departs the U.S. If the duration is greater than six months, the department will conduct a mid-point evaluation and a final evaluation.

Faculty supervisor signature: _____ Date: _____