

PHE 404 UNDERGRADUATE INTERNSHIP STUDENT CHECKLIST

Chronological Order

- I have identified and gained approval of my internship site prior to the term that I wish to register for PHE 404 credits.
- I have a description of the experience and skill requirements for my internship.
- I have developed learning objectives for my internship.
- I have reviewed and identified **CEPH Public Health Domains that relate to my internship learning outcomes.**
- I have stated my career objectives in writing.
- I have completed the PHE 404 Learning Application Form (signed by my internship preceptor) and submitted it to the Internship Coordinator
- I have completed the necessary registration steps as directed by the Internship Coordinator
- I have requested, upon completion of my required hours, that my worksite preceptor complete the Student Evaluation Form and submit electronically to my Internship Coordinator
- I have completed the Internship Summary and have emailed it to the internship coordinator.