

Updated: 3/30/2025

PHE 404 Undergraduate Internship Learning Application

Students will be registered their PHE 404 credits **after** the final application agreement is completed and approved. If any issues arise during the internship, please contact the Director of Applied Learning, Jamie Jones (jljones@pdx.edu). **The recommended deadline for the application is DUE THE TERM BEFORE the student plans to begin the internship.**

SECTION 1: STUDENT INFORMATION			
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Student First Name:			
Student Last Name:			
Student PSU ID Number:			
Student PSU Email:			
Student non-PSU Email:			
Student Phone Number:			
SECTION 1: STUDENT MA	JOR (CHOOSE ONE)		
 ☐ Applied Health & Fitness ☐ Public Health Studies: Community Health Promotion ☐ Public Health Studies: Clinical Health Science ☐ Public Health Studies: Health Services Administration ☐ Public Health Studies: Healthy Aging ☐ Public Health Studies: Indigenous Health ☐ Public Health Studies: School Health Educator 			
SECTION 2: STUDENT OB	JECTIVES		
Please state your specific career objectives (between 1 and 2 paragraphs).			

Please list your internship learning	ng personal goals/objec	tives (3 min, 6 max).
1.		
2.		
3.		
4.		
5.		
6.		
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SECTION 3: INTERNSHIP INFO	ship (ONLY the quarte	
Year	Term	Credits
Site Supervisor Name: Site Supervisor Title: Site Supervisor Email: Site Supervisor Number: Site Name: Site Address: Site City State, Zip: Site Mission/Purpose: Site URL:		
SECTION 5: REQUIRED SIGNA	TURES:	
Student Signature	Date	
Site Supervisor	Date	