



# CRIMINAL JUSTICE, FIRE SCIENCE TECHNOLOGY, JUSTICE STUDIES and LEGAL ASSISTANT Certificate

## Internship Employer Information

Student Name \_\_\_\_\_ Student ID# \_\_\_\_\_

### INTERNSHIP EMPLOYER

Agency Name \_\_\_\_\_

Agency Address \_\_\_\_\_

Agency Telephone # \_\_\_\_\_

### INTERNSHIP SUPERVISOR

Supervisor Name \_\_\_\_\_

Supervisor Title \_\_\_\_\_

Supervisor Email \_\_\_\_\_

Supervisor Telephone # \_\_\_\_\_

INTERNSHIP JOB TITLE (if known) \_\_\_\_\_

### BREIF JOB DESCRIPTION (or attach a job description)

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*The above information is accurate to the best of my knowledge.*

\_\_\_\_\_  
Student's Signature/Date