



THE  
**Experiential Learning Program**  
at SFOS

# Internship Checklist

Name: \_\_\_\_\_ 290 / 490 SEMESTER: \_\_\_\_\_

- INTERNSHIP AGREEMENT:**    \_\_\_ Student Sig    \_\_\_ Advisor Sig    \_\_\_ Supervisor Sig
- PRE-JOB RESUME**
- STUDENT REGISTRATION**
- SCAN/POST DOCUMENTS**
- MIDPOINT EVALUATION:**    \_\_\_ / \_\_\_ / \_\_\_
- FINAL EVALUATION:**        \_\_\_ / \_\_\_ / \_\_\_
- INTERNSHIP SUMMARY:**    \_\_\_ / \_\_\_ / \_\_\_
- POST-JOB RESUME:**         \_\_\_ / \_\_\_ / \_\_\_
- SUBMISSION OF FINAL GRADE**
- HARD COPY OF ALL DOCUMENTS TO STUDENT FILE**
- PRESENTATION (OPTIONAL)**

**INDEPENDENT STUDY (OPTIONAL)**

- INDEPENDENT STUDY APPROVAL:**    \_\_\_ Student Sig    \_\_\_ Advisor Sig    \_\_\_ Dept head Sig
- ADD/DROP FORM:**            \_\_\_ Student Sig    \_\_\_ Advisor Sig
- FISH497 SYLLABUS**
- SUBMITTED TO ACADEMIC OFFICE**
- SCAN/POST, COPY TO FILE**
- INDEPENDENT SUMMARY ASSIGNMENTS:**    \_\_\_ / \_\_\_ / \_\_\_
- PRESENTATION (OPTIONAL)**

**NOTES:**

	CRN:	ADVISOR:
		GRADE:

**Questions?**  
**Contact Dr. Trent Sutton**  
**Phone: (907) 474-7285 • Email: tmsutton@alaska.edu**

