

**DEPARTMENT OF ECONOMICS  
HUNTER COLLEGE**

**INTERNSHIP CONFIRMATION FORM**

Student Name	
Address:	Student ID #
	Phone:
	E-Mail:
Anticipated Number of Credits: 1	Major:
Anticipated Graduation Date:	

Host Organization:	
Host Department:	
Host Address:	Supervisor Name:
	Title:
	E-Mail:
Starting Date:	Ending Date:
Intern Schedule (Please be specific):	

By signing this form, I acknowledge my agreement with the terms and conditions of this internship as described in the accompanying documents.

**Student Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**Internship Coordinator's signature** \_\_\_\_\_