

**Agricultural & Extension Education 489
Internship in Agricultural Occupations**

Internship Application

Date: _____

Name: _____

Local Address: _____

City, State, Zip: _____

Telephone: _____

Email: _____

I am applying for enrollment in the AGR EDUC 489 Internship Program. My agricultural education adviser has explained: the purpose, course requirements, the agreement, the training plan, and the records sheets to be used during my internship experience.

Student Signature

Approval

_____ has my permission to enroll in AEE 489 for
_____ hours of credit, _____ quarter, 20____.

Faculty Adviser