STUDENT PRE-INTERNSHIP SEMINAR QUESTIONNAIRE

Please complete this form after the Pre-Internship Seminar and bring it to your Liaison Officer.

A. How do you feel about your Internship Program? Why?

B. What do you expect to learn from your Internship Program?

C. What are some of your concerns about the Internship Program?

Name of student: ______________________ Liaison Officer: ______________________
Date: _______________ Time: _______________