

## GEOL 386 EXPERIENTIAL LEARNING PROPOSAL

Please download and use this sheet as your proposal coversheet.

### Please type or print:

Your Name: \_\_\_\_\_ Date: \_\_\_\_\_

UID: \_\_\_\_\_ Your E-mail Address: \_\_\_\_\_

Phone number: \_\_\_\_\_

- Your intended graduation, e.g., May 20\_\_\_\_August 20\_\_\_\_, December 20\_\_\_\_
- Semester during which you will complete your internship activities (**circle**): Summer Fall Winter Spring
- Semester for which you will register for GEOL 386 (**circle one**): Fall Spring Summer
- Credits to be earned: 3 credits
- Where did you find this internship experience (announcement in class, email, university resource, word of mouth, etc.):  
\_\_\_\_\_

### Internship site (please print):

1. Organization name: \_\_\_\_\_

2. Mailing address: \_\_\_\_\_

3. Summary of the organization's purpose:

4. Site supervisor's name and title \_\_\_\_\_

5. Supervisor's work ph. number: \_\_\_\_\_

6. Supervisor's e-mail: \_\_\_\_\_

7. Name of instructor of record (if different from site supervisor) \_\_\_\_\_

8. E-mail of instructor of record (if different from site supervisor) \_\_\_\_\_

### **On attached sheets, please submit:** (Please use format given in the Guidelines below).

1. At least six academic and career objective(s) that relate to the internship you are proposing.
2. Description of work activities.
3. Work schedule, with total hours planned on-site and interval during which work is anticipated.
4. A proposed research topic **and** seven (7) examples of scholarly source materials for your term paper (including at least 3 peer-reviewed articles), (CSE format recommended. See <https://dal.ca.libguides.com/CitationStyleGuide/CSE>).
5. Signed (in ink) Consent and Release Form. (Must be hard copy).

### Approvals/Signatures (digital signatures accepted):

Student: \_\_\_\_\_ *By signing here, you acknowledge that you have read the "Checklists for Success" packet that outlines expectations re: your internship activities, research paper, logs, and journal.*

Instr. of record signature: \_\_\_\_\_ GEOL386 Sect. # \_\_\_\_\_

Site supervisor signature (who will submit a letter of evaluation – if different from instructor of record):  
\_\_\_\_\_

GEOL undergraduate director: \_\_\_\_\_ Approval date: \_\_\_\_\_

**Consent and release form signed, using a pen,** and returned (attached) with the proposal \_\_\_\_\_.