



**Doctoral Program in Educational Leadership and Administration  
INTERNSHIP PLANNING AND COMPLETION GUIDE**

Form: EdD15

Name \_\_\_\_\_ Date \_\_\_\_\_ Cohort # \_\_\_\_\_

<b>Internship</b>	<b>Summer in Which You Plan to Register/or Session in which you completed the internship</b>	<b>Location and Name of Internship (Include Site)</b>	<b>Supervisor</b>	<b>Completion of Internship (Date)</b>	<b>All Forms Completed (Date)</b>
EDN 661 Education/Government (Local and State)					
EDN 662 Issues Affecting International Educational Communities (International)					
EDN 663 Business (Name and Type of Business)					

To assist in planning for your Internship experiences, please identify the type business experience you would like to have?

\_\_\_\_\_

To assist in planning for your Internship experiences, please identify the type education/government experience you would like to have?

\_\_\_\_\_