MURP Internship Application Form

Virginia Commonwealth University
L. Douglas Wilder School of Government and Public Affairs

MURP students should complete Sections I and II then submit the completed form to the MURP Internship Coordinator for review and approval. The preferred form of submission is by email (i.e., attach a scanned copy of the completed form) but a hardcopy is also acceptable. *(Note: MURP degree requires a minimum of 120 planning-related internship hours.)*

I. Student Information

Student Name (Last, First MI) __________________________________________________________

VCU Student ID Number (V-number) ______________________________________________________________________________________

E-mail Address __________________________ Phone Number ________________________________

Address ____________________________________________________________

_____________________________________________________________ _______________

Check the semester(s) you would work as an intern. __ F __ S __ Su Year ________________

Signature (student) __________________________ Date __________________________

II. Internship Provider Information

Agency, Organization, or Business _______________________________________________________

Supervisor Name ___________________________ Title _________________________________

Supervisor E-mail __________________________ Phone Number _________________________

Describe the intern’s responsibilities, duties, or types of work that will be performed during this internship:

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________
What area/field of planning best describes this internship:

- Housing
- Economic Dev.
- Environmental
- Transportation
- Community Dev.
- Other

Please list the planning-related learning objectives for this internship experience:

1. ____________________________________________
2. ____________________________________________
3. ____________________________________________
4. ____________________________________________
5. ____________________________________________

 Supervisor Signature __________________________ Date _________________

III. Approval (to be completed by the MURP Internship Coordinator)

- Approve
- Disapprove (__________________________________________)

Signature __________________________ Date ______________________