Southern Connecticut State University School of Education Department of Information and Library Science

APPLICATION FOR APPROVAL AS INTERNSHIP SITE ILS 582 Library Science Internship

| Current Date: | Semester/Year of Placement | |
|-----------------------------|---|--|
| Name of Library/Agency _ | | |
| Address of Library/Agency | у | |
| Contact Person | Telephone | |
| Email | | |
| Professional Experience F | Placement Opportunities for student: | |
| | | |
| · | Project Opportunities for student: | |
| | | |
| Previous Skills or Experien | nce expected: | |
| | | |
| I have read the guidelines | s for the Library Science Internship (Initials) | |
| Site Contact/Sponsor: | | |
| Site Administrator/Director | r: | |
| Approved by: | | |
| SCSU Academic Advisor: | Date | |
| SCSU Internship Coordina | ator Date | |