

Faculty Advisor Sign-Off Form

To be completed by Faculty Advisor

Please complete form, **print to PDF**, save to your desktop, and email to student so they may upload it to their online application.

Student Name: _____
First Middle Last

Liberal Arts/ Major Adviser:

Please confirm that you have:

- Met with this student to discuss their summer internship plans and learning goals.
- Reviewed the student's written statements.

Comments (Optional):

Faculty Signature: _____ Date: _____

Type/Print Name: _____

Department: _____