J-1 Student Intern Application • International Student Services • University of Hawai‘i at Manoa **FORM** **C:** **INTERNSHIP** **PLAN**

**C**

To be completed by the UH Point of Contact or Primary Supervisor, whomever is applicable.

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Main Program Supervisor | Title | Email | Phone |
| List name(s) of student intern(s) for which this information will be used. |
| Phase Site Name | Internship Field of Study | Phase Site Address |
| Phase Name | Start Date (*mm-dd-yyyy*) of Phase | End Date (*mm-dd-yyyy*) of Phase | Phase Numberof |
| Description of Intern’s role for this program or phase *(limit* *3000* *characters)* |
| Specific goals and objectives for this program or phase *(limit* *3000* *characters)* |
| Please list the names and titles of those who will provide continuous (for example, daily) supervision of the Intern, including the primary supervisor. What are these person’s qualifications to teach the planned learning? *(limit* *3000* *characters)* |
| What plans are in place for the Intern to participate in cultural activities while in the United States? *(limit* *3000* *characters)* |
| What specific knowledge, skills, or techniques will be learned? *(limit* *3000* *characters)* |
| How specifically will these knowledge, skills, or techniques be taught? Include specific tasks and activities and/or methology of training and chronology/syllabus. *(limit* *3000* *characters)* |
| How will the Intern’s acquisition of new skills and competencies be measured? *(limit* *3000* *characters)* |
| Additional Phase Remarks *(optional,* *limit* *3000* *characters)* |

**NOTE:** **Use** **a** **copy** **of** **this** **form** **for** **each** **phase** **of** **the** **plan,** **if** **more** **than** **one.**

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