For Pre-major/ Major Adviser

Please confirm that you have:

☐ Met with this student to discuss her/his summer internship plans and internship learning goals
☐ Read this student’s Praxis funding application.

Signature: __________________________________________________________ Date: ____/____/____

Name: ____________________________ Department: __________________________

If you have comments, please write on the back of this form.

If preferred, you may email your confirmation / approval of this student’s internship to Praxis@smith.edu

For Lazarus Center Staff Sign-Off

☐ Check here if the application is complete.
☐ Check here if the student has been given the Praxis award notification letter.

Information missing from student’s application:

☐ Faculty sign-off
☐ Written statements
☐ Supervisor Confirmation Form
☐ A letter on office letterhead or email from student’s host organization confirming the offer of an internship and describing the intern’s duties and the kind of supervision she will be receiving.
☐ Resume
☐ Voluntary Assumption of Risk Agreement
☐ Code of Conduct
☐ Mandatory Travel Registry (Two copies of the emergency contact internship site and the travel waiver form) (*if required)

Other revisions needed:
__________________________________________________________
__________________________________________________________

As proposed in this application, this student’s internship is well structured, well supervised and likely to provide the student with educational opportunities for career exploration and substantive work.

Staff signature: ____________________________________________ Date: ____/____/____

Staff name (printed): ________________________________________

Comments may be added to the back of this form.