

**SOC 470 Application**  
**Agricultural and Rural Policy Internship**

**STUDENT INFORMATION**

Student Name	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<i>First Name</i>	<i>Middle Name</i>	<i>Last Name</i>

ISU ID Number	<input type="text"/>
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Registration Term	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<i>Fall/Spring/Summer</i>	<i>Year</i>	<i>Credits</i>

**Credit to Contact Hour Ratio**

- 3 cr = 9 contact hours per week
- 4 cr = 12 contact hours per week
- 5 cr = 15 contact hours per week
- 6 cr = 18 contact hours per week
- 7 cr = 21 contact hours per week
- 8 cr = 24 contact hours per week
- 9 cr = 27 contact hours per week

**INTERNSHIP INFORMATION**

Organization Name & Web	<input type="text"/>	<input type="text"/>
	<i>Name</i>	<i>Website</i>

Organization Address	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<i>Street Address</i>	<i>City</i>	<i>State</i>	<i>ZIP</i>

Internship Supervisor	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<i>First Name</i>	<i>Last Name</i>	<i>Position or Title</i>

<input type="text"/>	<input type="text"/>
<i>Telephone</i>	<i>E-mail</i>

Internship Details	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<i>Location (city, state)</i>	<i>Start Date</i>	<i>End Date</i>

Description of Internship	<div style="height: 200px;"></div>
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**INTERNSHIP POLICIES**

Students enrolled in SOC 470 agree to the following during the internship ...

- Perform the required internship contact hours to earn my academic credits.
- Abide by professional standards and complete the tasks assigned to me.
- Follow the ISU Student Code of Conduct's Non-Discrimination and Anti-Harassment policy.
- Have my internship supervisor complete and return my final evaluation form. These can be found at <https://smalltowns.soc.iastate.edu/agrps-forms/>

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*Student Signature*

*Date*

**Return form to:**

David Peters, Ag and Rural Policy Studies Coordinator  
302 East Hall  
Tel. (515) 294-6303  
[dpeters@iastate.edu](mailto:dpeters@iastate.edu)

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**DEPARTMENT USE ONLY**

Jr./Sr.     No Holds     Internship OK     Credits OK     \_\_\_\_\_

Application Notes

Application Approved

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*Date*                      *Advisor*

   Final OK     Overall OK     S Grade     \_\_\_\_\_

Credit/Grade Notes

Credits Approved

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*Date*                      *Advisor*