PHE 4750—PUBLIC HEALTH EDUCATION SEMINAR AND INTERNSHIP—APPLICATION

DEPARTMENT OF HEALTH PROMOTION AND PHYSICAL EDUCATION

NAME: ________________________________________________________________
KSU#: ________________________________
PHONE: ________________________________ STUDENT KSU E-MAIL: __________________________

1. Current Overall (Adjusted) Grade Point Average: _______________________ (*Must be minimum of 2.5)
2. Current Grade Point Average in Public Health Education Core: ________________ (*Must be minimum of 2.5)
3. Has student made below a letter grade of “C” in any Public Health Education course? Yes_____ No_____ If “YES” please specify courses and appropriate action(s): ________________________________

Will ALL PHE Major Program coursework be completed prior to internship? Yes_____ No_____ If not, please explain ____________________________________________________________

4. By initialing in the space provided, the student understands that he/she must provide proof of current professional liability insurance and current CPR certification prior to starting the internship____

5. Semester completing internship: Semester ________________ Year ________________

By signing below, the student and academic advisor confirm that the information provided is correct:

Student Signature ________________________________ Date ________________
PHE Internship Coordinator Signature ________________________________ Date ________________

THIS APPLICATION MUST BE SUBMITTED TO THE PHE INTERNSHIP COORDINATOR BY THE FOLLOWING DATES:

- April 1 for internships which will be completed during the Fall Semester
- October 1 for internships which will be completed during the Spring Semester
- February 1 for internships which will be completed during the Summer Semester