

## Graduate Student Experiential Learning Award Application

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Degree pursuing:     PhD             EdD             MS/MA/MPH

Graduate program: \_\_\_\_\_

Anticipated graduation month and year: \_\_\_\_\_

Internship Supervisor Name: \_\_\_\_\_

Internship Supervisor Title: \_\_\_\_\_

Internship Supervisor Email: \_\_\_\_\_

Internship Supervisor Phone: \_\_\_\_\_

Describe your internship. Be sure to include the organization/company, your role, total number of hours, and start and end dates. (1250 character limit)

What did you learn / are you learning from this internship experience? (1250 character limit)

How does this internship experience support your career development goals? (1250 character limit)

How would receiving this monetary award assist you? (1250 character limit)

Confirmations:

- I confirm that I am a current UC Davis graduate student and in good standing.
- I confirm that my internship experience differs from my research for my thesis and/or dissertation.
- I confirm that my internship was not part of my degree program, including any requirement for my major field, minor field, or designated emphasis (e.g. required practicum, rotation, or experiential education).
- I confirm that the information contained in this application is true and correct to the best of my knowledge.