SAFE 6997: Cooperative Internship
Project Proposal Form

Student name ____________________________  Student ID _______________________________

Correspondence address _____________________________________________________________

City _______________________________ State ____________________  Zip code ____________
Telephone number____________________________ E-mail ___________________________

Internship position or job __________________________________________________________

Firm _______________________________  Supervisor _________________________________
Address __________________________________________________________________________

City _______________________________ State ____________________  Zip code ____________

Project description and objectives

Describe the project and its rationale, including a list of the tasks to be completed and what will be delivered to the company (e.g., report, trainings, etc.).

[attach additional pages as necessary]
**Project agreement**

Unless agreed upon by all three parties, no changes will be made to the major tasks or deliverables sections in the above proposal.

**Student**

I agree to work with my supervisor to complete this project as described above and to work with my advisor to ensure timely completion of the Plan B requirements associated with this project.

Student:  ____________________________ (signature)

____________________________ (printed)  Date:  __________

**Supervisor**

The project as described will meet a significant environmental health and safety need for my organization and I am willing to work with this student to ensure that the project is completed successfully. Also, if the project involves confidential or proprietary material, I will notify the student’s advisor to make the necessary arrangements addressing how the student may report, present, submit and/or publish such material as part of the student’s internship requirements (i.e., the “Plan B” component).

Supervisor:  ____________________________ (signature)

____________________________ (printed)  Date:  __________

**Advisor**

The project as described meets the requirements of the UMD MEHS program for the internship program and the associated Plan B component and I am willing to work with this student to ensure that the Plan B requirements are completed satisfactorily.

MEHS Advisor:  ____________________________ (signature)

____________________________ (printed)  Date:  __________