**2017 Summer Internship Final Report**

Please complete and return this form by **September 8, 2017**. You may send it by email, fax, or postal mail: Higher Education Department, Jack Kent Cooke Foundation, 44325 Woodridge Parkway, Lansdowne, VA 20176, (703) 723-8030 (fax) or [scholars@jkcf.org](mailto:scholars@jkcf.org). Please contact the Foundation at (800) 846-9025 if you have any questions about this form.

* **Internship Opportunities**

|  |  |
| --- | --- |
| **Scholar name:** |  |
| **Internship site:** |  |
| **Internship supervisor:** |  |

**Please mark selection with an X**

|  |  |  |
| --- | --- | --- |
| Yes | No |  |
|  |  | Did you achieve the goals you and your supervisor set up at the beginning of the internship? If not, please explain why. |
|  |  | Would you recommend this site to another scholar as a location for future internships? Why or why not? |
|  |  | Do you grant the Foundation permission to share with other Scholars information about your particular experiences, with the understanding they may choose to contact you about your experiences. |

* **Scholar Signature**

I certify I completed the minimum 320 hours as stipulated by the Foundation.

|  |  |  |  |
| --- | --- | --- | --- |
| Signature |  | Date |  |

* **Overall Experiences**
  + - * + Describe your accomplishments and the impact your internship had on your academic and personal goals. Please be thorough and thoughtful in your response, as your introspection will assist you in best processing the experience. You should consider gaining feedback about your performance—both positive and constructive, from your supervisor through a short review process to help you in composing this response. If you need assistance in how to request a review or what questions to cover in a review, we are happy to help. (min. 350 words)