## **Accounting Internship Information Form**

To enhance the education of accounting students at The University of Texas at Austin, the faculty encourages internships as a formal part of our graduate accounting program. As a part of our evaluation process, we would appreciate receiving from you the information requested below, either on this form or via a separate statement.

Student's Name		UT EID		
Em	nployer/Firm			
Address		Phone	Phone	
Supervisor (Person completing form)		E-mail address:		
1.	Briefly describe the objective of your internship p	orogram.		
2.	Briefly describe the internship work experience, supervision.	, including the nature of various	job assignments and level o	
3.	Briefly describe training programs provided by the	ne employer for the student during	the internship.	
	the intern's employer, we understand that acaden	nic credit will be granted for this	<b>internship.</b> Date	
~		wo weeks of the <b>start</b> of the intern	ship to:	

Internship Coordinator MPA Program Office; UT-Austin 2110 Speedway, Stop B6400 Austin, TX 78712-1281

via Mail

MPAAccountingInternships@mccombs.utexas.edu

via E-mail

512-471-3365

via Fax