

**P.E.P.**

**PERSONAL EDUCATION PLAN**

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

**Complete Sections 1-3 below and return to teacher with resume, contract and application.**  
**THIS WILL BE SENT TO PROPECTIVE MENTORS.**

1. What expectations do you have regarding your internship?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. What would you like to observe?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. What would you like to work on, investigate, or develop?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

This section is to be completed at your intake interview.

Internship Area: \_\_\_\_\_ E-mail \_\_\_\_\_

Mentor: \_\_\_\_\_ Phone No: \_\_\_\_\_

Address: \_\_\_\_\_ Fax No: \_\_\_\_\_

Interview Date: \_\_\_\_\_ Start Date: \_\_\_\_\_

**My mentor and I agree that I will be at work from \_\_\_\_\_ to \_\_\_\_\_ on \_\_\_\_\_ days of the week.**

**Appropriate dress would be:** \_\_\_\_\_

**Parking arrangements:** \_\_\_\_\_

**My activities will include, but not be limited, to:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Mentor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

Copies given to teacher, intern, and mentor at completion of intake interview. Intern takes copy home for parent signature and returns to teacher's mailbox at school.