**Freeman Foundation Eastern Asia Internship Grant**

**Certification of Internship**

The information below must be completed by the person who will supervise your internship.

Student name:

Name of organization:

Address of organization:

Phone: Email: Website:

Internship supervisor and title:

Date begins: Date ends: Hours per week:

Give a brief description of this organization:

Describe the daily tasks and a substantial project this intern will complete:

What skills do you expect the intern to acquire while working for your organization?

How will you help this intern integrate into the local culture?

*By singing this form, I certify that my organization will be able to provide an eight-week internship to the above named student in the summer of 2020.*

*My organization will assist the prospective intern with obtaining the necessary visa (if applicable) and other required documentation (work permit, etc.).*

Supervisor signature: Date