

To be printed on university letterhead

Certification of Enrollment and Expected Degree Completion

Name of Student:

Date of Birth (MM/DD/YY):

Current degree level:

Field of study/Major:

Expected Graduation Date (MM/DD/YY):

Name of home institution:

Address of home institution:

This is to certify that the student and home institution named above meet all requirements for participating in the internship program with the University of Wisconsin-Madison.

- The above-named institution facilitates a curriculum at the post-secondary level.
- The above-named institution acknowledges and approves any compensation to the student intern during their program.
- The internship program at the University of Wisconsin-Madison will fulfill a degree requirement for the student at their home institution.
- The student is currently enrolled and pursuing an undergraduate degree.
- The student is currently in good academic standing.
- The student will return to complete and obtain a degree from the home institution named above.

By signing below, I certify that all above statements are true and that I approve of the student's internship as associated with the internship program at the University of Wisconsin – Madison.

Printed name of University Representative:

Title:

Signature:

Date: