

California State University, San Bernardino
Department of Health Science and Human Ecology
HSCI 496: Internship in Environmental Health

Student Final Report: _____ Quarter, _____

Name of student : _____ SSN _____

Address: _____

Telephone number: _____

Sponsor (agency): _____

Address: _____

Phone number: _____

Service Learning: From _____ To _____

Summary of activities to learn about the overall operation of the environmental health services program
(use additional sheet, if necessary):

Project supervisor for student:

Description of major project:

Evaluation, comments, and rating of the student: (use additional sheet, if necessary)

Approximate amount of time spent on service learning: _____ hours.

Signed _____ Date _____