

Texas A&M University
Department of Information & Operations Management
ISTM 684 – Internship
Employer Offer Form (Domestic Students Only)

Employer: Please complete the following and return the form to the student for submission with his/her internship application package.

Student Last Name: _____ Student First Name: _____

Employer Name: _____

Physical Address of Employment Location:

Student's Job Title: _____

Student's Job Duties:

Employment Start Date: _____ Employment End Date: _____

Number of hours/week the student will work:

Supervisor's Name: _____

Title: _____

Phone: _____

E-mail: _____

Supervisor's Signature: _____