

**FORM I**  
**INTERNSHIP AGENCY QUESTIONNAIRE**

\*MS Word document at <http://www.wiu.edu/coehs/leja/fire/index.php> current students, internship forms

1. Name of Agency:

2. Name of Coordinator: \_\_\_\_\_

3. Agency Address:

Number

Street

City

State

Form completed by: \_\_\_\_\_ Date \_\_\_\_\_