

# Reclamation Manual

Directives and Standards

**TEMPORARY RELEASE**

*(Expires 10/01/2022)*

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## Bureau of Reclamation Resource Assistant Internship Participant Verification Form Template

*To be completed within first week of internship.*

### Reclamation Intern Supervisor

Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

### Intern Information

Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Anticipated Graduation Date: \_\_\_\_\_

Current Degree Type (undergraduate/graduate): \_\_\_\_\_

If undergraduate, current class standing (e.g., freshman sophomore, junior, senior): \_\_\_\_\_

Start Date of Internship: \_\_\_\_\_ End Date of Internship: \_\_\_\_\_

(Note: Internship must be at least 11 weeks)

Region/Office of the internship assignment: \_\_\_\_\_

Approved Project Proposal name: \_\_\_\_\_

Brief description of duties and responsibilities of assignment:  
\_\_\_\_\_  
\_\_\_\_\_

**Project measurable and project Competencies outcomes:** *(e.g. problem solving, strategic thinking, oral communication, etc.)*

I certify that the above information accurately represents the work that will be conducted during my internship with the Bureau of Reclamation.

\_\_\_\_\_  
Intern Signature

\_\_\_\_\_  
Date

I certify that the above information accurately represents the work that will be conducted by the intern during his/ her internship with the Bureau of Reclamation.

\_\_\_\_\_  
Reclamation Supervisor Signature

\_\_\_\_\_  
Date