JGHC Experiential Learning - Proof of:
"Working 8+ hours/week for 1+ semester(s) w/ supervisor collaboration and significant educational influence"

Student Name:

Student UID\#:

Name of Organization:

Supervisor Name:

Supervisor Contact Info:

Average Hours/Week of Work:

Employment Start - End Date:

In a few sentences, describe how this employment relates to your career or educational goals:
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## For your USF or JGHC advisor:

I confirm that this working experience meets all of the following criteria:

- Time requirements (8+ hours/week and at least 1 semester)
- Supervisor collaboration
- Significant influence related to the student's career or educational goals

Advisor Name:

Advisor Signature/Date:

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