

**RESPONSE TO PASSHE INTERN AGREEMENT for  
Mansfield University of Pennsylvania Student Interns  
Department of Criminal Justice Administration**

M.U. C.J. Student Intern Name	
M.U. Faculty Supervisor Name	
Organization Name	
Organization Address	
Organization Supervisor	
Supervisor's Title	

**SELECTION CRITERIA OF STUDENT INTERNS**

1. Preliminary Interview:     \_\_\_ Yes   \_\_\_ No
2. Follow-Up Interview:     \_\_\_ Yes   \_\_\_ No
3. Review of Resume:       \_\_\_ Yes   \_\_\_ No
4. Background Investigation: \_\_\_ Yes   \_\_\_ No
5. Drug Testing:             \_\_\_ Yes   \_\_\_ No
6. Health Screening:        \_\_\_ Yes   \_\_\_ No
7. Other:                     \_\_\_\_\_
8. Other:                     \_\_\_\_\_
9. Other:                     \_\_\_\_\_

