***Department of Management & Entrepreneurship  
Entrepreneurship Internship Program***

ENT 484: Internship Faculty Recommendation Form

**Faculty Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

##### \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (student name) was a student in my \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (course name) class. I believe this individual would make a(n) contribution to our internship program. (check only one):

##### Excellent

##### Good

##### Average

##### Poor

##### Overall, I (check only one) Recommend or Do not recommend this student be approved to register for this course.

**Comments (highly encouraged):**

Please return completed form by email to Zakiya Hawkins at zakiya.hawkins@asu.edu