MHA Internship Work Plan

Please use this document to help create the work plan for your MHA Internship. The work plan should concisely describe what you and your preceptor have planned for you to complete during the internship.

# Student Name:

**Internship Host Site (name, city, state, zip code)**:

**Preceptor (name, title, street address, city, state, zip code, email, and phone number)**:

|  |  |  |
| --- | --- | --- |
| Start Date: | End Date: | Average # Hours/ Week: |

Please describe your planned projects. Include: (1) overall goal; (2) deliverables; and (3) related competencies for each project:

Please describe any other planned activities for this internship. Examples include attending Medical Executive Committee meetings, touring facilities, participating in negotiations, etc.:

Please provide the titles of the people you will work with on various projects and activities: