

**Master of Public Administration
Internship Waiver Request**

**Department of Political Science
Kansas State University**

Applicant's Name: _____ **Date:** _____

Phone: _____ **Email:** _____

Public or Nonprofit Agency Where Employed

Name: _____

Location: _____

Period of Employment:

Start date: _____

End date: _____

Hours worked/week _____

Position Title: _____

Our MPA waiver policy requires experience of an administrative nature in a public or nonprofit agency. Please provide a detailed summary of your relevant responsibilities, assignments, and/or projects. You will want to be as specific and detailed as necessary for demonstrating your administrative experience. If you happen to have a work product which speaks to your experience, please attach it to this application. If you do not have a work product, describe the project(s), assignment(s) or responsibilities you feel best reflect your administrative experiences.