



**East Stroudsburg University
Internship Title IX Information
Acknowledgement of Receipt**

Date _____

Name of Student: _____ Student ID # _____

Student Email Address: _____

Dean/Director: _____

I, _____ hereby acknowledge the receipt of the East Stroudsburg University Title IX information for Internship, Practicum, Student Teaching, Service Learning and Study Abroad Students, and Supervisors' documentation.

Signature of Recipient

Title IX Sexual Misconduct Policy

https://www.esu.edu/university_policies/list/ESU-2020-01.cfm