

**THE UNIVERSITY OF TEXAS AT SAN ANTONIO**

**PROSPECTIVE AFFILIATION AGREEMENT**

**Agency / Facility Information Sheet**

*This information collected on this sheet will be used to complete a formal agreement with your institution.*

Today's Date: 09 /19 / 2017

Agency Name: University of Texas San Antonio

Address: One UTSA Circle

Phone Number: 210-458-5998 Email address: sarah.ullevig@utsa.edu

1. Please briefly describe the scope of your facility/agency's work. Printed brochures or fact sheets explaining your organizational goals may be attached.

Nutrition-related research. See attached flyer.

2. Indicate the most appropriate person(s) to contact within your facility/agency regarding internship possibilities.

**Name** Sarah Ullevig **Title/Responsibility** Assistant Professor **Phone #** see above

**Office Address:** see above **Email:** see above

3. Briefly describe the internship experiences available with your facility/agency.  
Research assistant to gain experience in nutrition-related research projects-see flyer.

4. Are there any restrictions to an internship that the student or university should be aware of?  
Will this be a paid position? No, not paid

5. Is your organization a HIPPA covered agency? YES \_\_\_\_\_ NO X\_\_\_\_\_

Please return this questionnaire to:  
Stephanie Keiningham Greeson, LAT  
Health & Kinesiology Internship Coordinator  
College of Education and Human Development  
UTSA  
San Antonio TX 78249-0654  
Tel. (210) 458-8551 Email: [stephanie.keiningham@utsa.edu](mailto:stephanie.keiningham@utsa.edu)  
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