

APPLICATION FOR INTERNSHIP

Committee on Individual Studies

Application due in the Office of the Registrar by November 3, 2010.

- Instructions:
- 1) Fill in the personal information listed below.
 - 2) On separate sheets, the student and the academic supervisor must supply the information requested on page 3 of this application. **The person supplying the information must sign his/her submittal.** Refer to page 4 for guidelines.
 - 3) The student must obtain the signatures of the faculty indicated on the form and from agency supervisor.
 - 4) The student must return the completed form to the Registrar who will forward it to the Committee on Individual Studies.

Type or Legibly Print

Name: _____
Last First M.I. Student ID #

Campus Box # Tentative Graduation Date Major

Department in Which Credit is to be Awarded Academic Supervisor

Project Title _____

Sponsoring Agency Name/Title of Agency Supervisor

Agency Mailing Address _____

Agency Telephone Number _____

Semester Hours of Credit Requested for Project _____

Project requested for _____ semester of _____ (year).

<u>Applicant's Agreement:</u>	
I have participated in preparing this application and the attached statements. I understand that I must complete to the satisfaction of the Academic Supervisor all the activities herein described in order to receive credit for this project. I understand that if approved, this application functions as a contract between me, my academic supervisor, and my agency supervisor. I have read and I agree to the stipulations described herein.	
_____ Student Signature	_____ Date

By signing below I verify that this student is qualified to pursue the project.

Approval, Academic Supervisor

Date

Approval, Department Chair

Date

Approval, Agency Supervisor

Date

SIGNATURES FROM EVERY MEMBER OF THE ACADEMIC DEPARTMENT AWARDING CREDIT ARE REQUIRED FOR TWELVE AND SIXTEEN CREDIT INTERNSHIPS.

Approval, Department Member

Date

Approval, Department Member

Date

Approval, Department Member

Date

Approval, Department Member

Date

To Be Completed by the Office of the Registrar

GPA _____ Major GPA _____

Semester hours completed _____

Major _____

Total previous studies _____

Committee on Individual Studies

Project approved:

Signature, Committee Chair

Date

Project denied:

Signature, Committee Chair

Date

