

# INTERNSHIP FOR CREDIT

OVERVIEW: Juniors and Seniors in good academic standing may be scheduled for internship courses with the permission of a faculty sponsor, the departmental Internship Coordinator, and the Associate Dean. Students may take two internships for credit that apply toward graduation.

INSTRUCTIONS: This form must be completed and approved no later than the end of the third week of class of the semester in which the student enrolls. **\*\*No projects will be approved after that time.\*\*** Once all signatures have been received, submit form to the Registrar's Office.

STUDENT NAME: \_\_\_\_\_  
Last First Initial

BRONC ID: \_\_\_\_\_ MAJOR(S): \_\_\_\_\_ MINOR(S): \_\_\_\_\_

CLASS YEAR: \_\_\_\_\_ GPA: \_\_\_\_\_ DATE: \_\_\_\_\_ SEMESTER/YEAR: \_\_\_\_\_

DEPT: \_\_\_\_\_-491 CREDITS FOR PROJECT: \_\_\_\_\_

## INTERNSHIP PLACEMENT INFORMATION

Name of Company/Organization: \_\_\_\_\_

Address of Company/Organization: \_\_\_\_\_

Title of Student Position: \_\_\_\_\_ Hours to be worked/week: \_\_\_\_\_

Name and Title of On-Site Supervisor: \_\_\_\_\_

Supervisor's Phone: \_\_\_\_\_ Will you be compensated?  YES  NO

Description of Company/Organization: \_\_\_\_\_

Description of internship duties: \_\_\_\_\_

## APPROVALS

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Faculty Sponsor: \_\_\_\_\_ Date: \_\_\_\_\_

Department Coordinator: \_\_\_\_\_ Date: \_\_\_\_\_

Associate Dean: \_\_\_\_\_ Date: \_\_\_\_\_

**\*FORWARD TO [REGISTRAR@RIDER.EDU](mailto:REGISTRAR@RIDER.EDU) FOR PROCESSING\***

Registrar's Office: \_\_\_\_\_ Date: \_\_\_\_\_