INTERNSHIP CONTRACT __MGMT495/__ACCT 495

Student Name:		B#	
Studen	nt Email:		
Sponsoring Agency:	Internship Supervisor:		
Agency Address:			
Supervisor Email:	Supervisor Phone#:		
Semester:	Year:	Grade Option is P/F only	
Will this internship exceed to combined?Yes Yes Yes Yes Yes You are required to have the you are doing a marketing in Have you completed your 31 Is this a paid internship? Have you ever been convicted approved through the camparane Have you ever been convicted process? Yes Yes Yes	the max of 8 credits of inNo ITS CANNOT BE USEI e 311 core course comp nternship, you must had 11 course?YesYesNo ed of a felony or been cous process?Yes ed of a felony but not reNo	No onvicted of a felony but evaluated and	
TO BE FILLED OUT WITH SUPH LEARNING OBJECTIVES (please METHODS TO ACHIEVE OBJECTIVES)	e explain what you hope	to learn from this internship): s which will facilitate the learning noted above):	

Grading is mandatory P/F, based upon an acceptable evaluation by the internship supervisor and submission of

COURSE WORK REGISTRATION FORM

VARIABLE CREDIT

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4cr.		1cr2cr3cr.
		Semester and Year: (semester)
TITLE OF COURSE (for internship and independent study only. TA's do not need to out a title		
	TA Only	
	Instructor	_
	Signature of Instructor (TA only)	Date
	Office Use Only	
Instructors section code:	SOM Approval	