

Internship Eligibility Form

Please return to the Undergraduate Coordinator in MU 207 no later than November 15th for spring registrations, February 15th for summer registrations, and April 15th for fall registrations. This form is required for placement into MMP 494. Students will be notified by the Internship Coordinator of their eligibility and registration procedures.

Student Information

Name:		Student ID:	
BSU Email		Phone	
Major		Current GPA	
Internship Semester		Year in School	

Internship Provider Information

Name of Business		Address	
Site Supervisor		Supervisor's Title	
Supervisor's Email		Supervisor's Phone	
Hours per week		Pay per hour (if applicable)	

Eligibility Questionnaire

Why do you think this internship program is right for you?

What do you hope to learn through your internship experience?

Please describe the anticipated tasks and responsibilities of your position at the internship provider?

How has your program coursework prepared you for this experience?

UNDERGRADUATE OFFICE USE ONLY:

- Approved by Faculty Coordinator

Signature: _____ Date: _____

- Reviewed by Undergraduate Coordinator/Internship Coordinator

Signature: _____ Date: _____

- Permission entered by Scheduling Coordinator Date: _____