## **APPLICATION FOR INTERNSHIP**

## HISTORY DEPARTMENT

## FRAMINGHAM STATE UNIVERSITY

Name:		FSU Student ID#:
Last	First	M.I.
Major 1:		Daytime Phone #:
Major 2:		Anticipated Semester/Year of Graduation:
Minor 1:		Check Appropriate Box: [ ] Day Division <u>OR</u> [ ] DGCE
Internship Course #:	HIST 495	Semester in which the Internship will be taken:
Please indicate the number	r of hours per week	: Corresponding total of Course-Credits:
Location Internship will ta (Please provide name and full addr	ess of site)	
Name and Title of On-Site	e Supervisor:	
Description of Internship on separate document).	Experience: Include	the general topic, the specific area to be studied (or attach required information
If this Internship is intend number and title for the su		stitution for a Major/Minor degree requirement, please indicate course
Signature of Student	Date	
Signature of Supervisor (as approved by Department Chair)	Date	Please Print Faculty Supervisor's Name
Signature of Major Advisor	Date	
Signature of History Department C	hair Date	

This completed form must be submitted to the Office of the Registrar prior to the end of the Course Add/Drop period as it becomes part of the student's permanent file.

Please Print Information