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** Experiential Learning/Internship Registration**

This form must be completed and submitted to the Registrar’s Office prior to beginning an experiential learning or internship experience. Once the student is registered for the experience, he/she will work with his or her faculty mentor and work supervisor to set goals for the work experience. The faculty mentor will determine the criteria for grading, in addition to a written evaluation from the employer.

**Student Information:**

Name: ID:

 Please print

Major: Advisor:

 Please print

Faculty Mentor (person submitting grade):

 Please print

**Choose one:** **Choose one:**

⎕ Experiential Learning ⎕ Internship ⎕ Fall ⎕ Spring ⎕ Summer

**Number of credits**: **Grading:** ⎕ Pass/Fail ⎕ Letter Grade

Student Signature: Date:

Advisor Signature: Date:

Faculty Mentor Signature: Date:

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FOR OFFICE USE ONLY

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 Date Received Date Processed Initials