

Internship Application

Students, together with faculty members supervising internships, are requested to initiate this application and have it processed through the approvals as early as possible. No credits will be granted retroactively. Students must be proactive and complete the internship process from advisement to registration prior to commencement of the internship.

A	Educational Information	Responses in this Section
	(To be completed by student)	
1	Last Name	
2	First Name	
3	Middle Initial	
4	Banner ID	
5	Cell Phone Number	
6	Major/Minor	
7	Academic Advisor	
8	Undergraduate or Graduate	
9	GPA	
10	Credit hours completed prior to internship	
11	Anticipated Graduation Date	
12	IUP Email Address (Official University Form of Communication)	
13	Alternative Email Address	
В	Internship Information (To be completed by student and verified with faculty member)	Responses in this Section
1	Proposed Semester for Internship: Fall, Spring, Summer, or <i>Winter – with special permission</i>	
2	Year of Internship	
3	Total Requested Credits for Internship (40 hours = 1 credit) up to 12 credits available with approval of IUP Intern Coord.	
3	Internship Company/Agency	
5	Specific Department within Company	
6	Company Address	
7	City/State/Zip	

8	On-site Supervisor Name	
9	On-site Supervisor Phone	
10	On-site Supervisor Email	
11	Proposed Start Date per offer letter	
12	Proposed End Date per offer letter	
13	Number of Weeks	
14	Total Hours/Week	
15	Paid/Non-Paid Internship	

PLEASE READ:

- 1. A one to three-page job description of the internship duties and an offer letter (on official company letterhead or from an official company email with start and end dates) must be included with this application
- 2. Please note, IUP does not provide liability coverage for students while on internship.

C	Course Information (To be completed by faculty member)	Response in this Section
1	Course/Internship Subject Letters	
2	Course/Internship Course Number	
3	Course/Internship Title	
4	Course/Internship CRN Number	
5	Course/Internship Section Number	

Internship Approval (the following signatures must be obtained in sequence)	Signature in this Section	
Student Signature and Date:		
Faculty Internship Supervisor and Date		
Chairperson Signature and Date		
Completed Application, all materials, and signed forms, must be delivered at this point to Maureen Bash in 301 Eberly. Student (copy to faculty) will be notified via email once they are registered for the Internship.		
Assistant Dean Signature and Date		

Revised: 10/7/2021 – ECOB Corporate Relations/Internship Committee