Marietta College Academic Internship Registration Form

This form **MUST be submitted** to the Records Office **NO LATER** than the end of the Add period for the semester in which the internship takes place. For internships beginning after the add period ends, the form is due is no later than one week after the internship start date.

		Studen	t Information			
Last Name:	ast Name:		First Name:			
ID#: Major(s):				Cla		
How did you find this Internship Opportunity?		? Career Center	Family/Frie	end Faculty	Faculty Referral	
		Internsh	nip Information			
Prefix (e,g., MNGT):		_ Year & Term:		Credits	Credits (0-3) :	
Course Level: 1	97 (FR-Level) 🔲 297	☐ 297 (SO-Level) ☐ 397 (JR-Le		☐ 497 (SR-Level) ☐ 597 (GR-Level)		
Student Status:	☐ Full-Time ☐ CE	☐ Masters	☐ International	Grade Type:	☐ Letter ☐ S/U	
Compensation:	☐ Paid	☐ Ur	npaid			
Reflection Compo	nent:	tion 🔲 W	ritten Report 🔲	Journal	ner:	
Start Date: End Date:			Hours per Week (may be an estimate):			
Total Required Ho	urs (i.e., 40 hours per cred	dit):				
		Employ	er Information			
Organization/Com	pany Name:					
Site Location (U.S.	State or Country):					
Site Supervisor's N	lame:			Title:		
Email:				Telephone:		
		Si	gnatures			
Student:				Date:		
Instructor:				Date:		
Dept. Chair:				Date:		
Registrar:				Date:		
Education Abroad				Date:		

^{*} Required only for students enrolled at MC on a student visa.

PLEASE PROVIDE THE FOLLOWING DETAILS:
JOB DESCRIPTION (Expected responsibilities, tasks, projects):
GOALS & OBJECTIVES (Skills/experiences that will contribute to your personal and career goals):
ACADEMIC CONNECTIONS (How the experience enhance what you have learned in classes at MC):
ACADEMIC CONNECTIONS (Now the experience children what you have learned in classes at Me).