

COLLEGE of VISUAL ARTS

PERMISSION TO REGISTER INTERNSHIP PROGRAM

Bring this form to the proper offices for the required signatures and when finished return to the Registrar's Office. Registration must be completed *BEFORE* you begin your internship experience.

Name _____ Date _____

— For Office Use Only —

Date _____

1 – Financial Aid Office

Approval for Fall Internship _____

Approval for Spring Internship _____

Approval for Summer Internship _____

A student taking 12-18 credits will not be billed any additional fees for the internship.

An internship taken during the summer months will be billed the summer tuition rate for that term.

Financial Aid Pending No Yes

If Yes, is paperwork:

Completed Pending (submitted not submitted)

Total Charges _____

Less Payment _____

Less Aid _____

Balance Due _____

2 – Business Office

Approval _____

3 – Internship Coordinator

Approval _____

(All forms are completed and yellow copy of contract submitted to Registrar's Office.)

4 – Registrar's Office

Approval _____