

**REQUEST FOR ACADEMIC CREDIT
INTERNSHIP FORM**

DEPARTMENT _____ **COURSE NUMBER** _____ **SECTION** _____ **SEMESTER/YEAR** _____

Student Name: _____ Student ID: _____

Email: _____ Telephone number: _____

Major: _____ UNT Dallas GPA: _____ Expected graduation date: _____

Employer: _____ Phone: _____

Address: _____ City, State, Zip: _____

Supervisor: _____ Title: _____

E-mail: _____ Start Date: _____

Pay Rate/Hour (confidential): _____ Hours/Weeks: _____

Position/Title: _____ Student's work phone: _____

Other Internship Credit RECEIVED: _____ or IN PROGRESS: _____ SEMESTER/YEAR: _____ # of Credit Hours _____

Please provide the following:

- Internship Guidelines Form
- Request for Academic Credit Form
- Job Description

Requested By:

Student: _____ (Signature) Date _____

UNIVERSITY COLLEGE (UPS DIVISION ADVISOR)

PRE-REQUISITES MET: YES _____ NO _____

SIGNATURE: _____

DATE: _____

STUDENT CONTACTED

CODE ISSUED: _____

SIGNATURE: _____

DATE: _____

DEPARTMENT

APPROVED DENIED

COMMENTS: _____

SIGNATURE: _____

DATE: _____