

Application for Internship Experience/Course

To participate in any of the required or elective internship courses at Fisher College the following procedures must be followed:

1. Complete this Application Form and forward to the student's Campus Director or Academic Advisor.
2. The Campus Director will examine the student's Degree Audit to be certain the student is more than 3/4 the way through their degree (or certificate) program and have the applicable courses and grades to proceed into the internship course.
3. An internship instructor will be assigned to the student's course and will call the student and the business where s/he has suggested the internship may work out best. *If the student does not list an internship site/business or has not attempted to secure a site, the instructor will assist in this endeavor. (Please note that the internship course will be delayed until the appropriate site is secured and a contract worked out with all three parties).
4. Some internship sites will require the student have paperwork on file to proceed (medical insurance, CORI checks, immunizations for medical internships, uniform, etc). The College will notify the students of these requirements.
5. The instructor, internship site and student will enter into an educational contract of agreement as to student goals, objectives, academic course requirements, Bb discussions, classroom meetings, a possible final project or journal, work dates/times, starting/ ending dates, etc.
6. The student must officially Register for the course with the College (like all other courses) and then begin the internship.

Student Name _____ Student ID # _____

Address _____

Town/City _____ State _____ Zip _____

Contact Information: Home Phone _____ Work or Cell _____

Email address _____

Degree Program _____ Course Number _____ Term Date _____

Suggested Internship Site(s), contact person, phone and email (in order of preference):

1. _____

2. _____

3. _____

Requested Internship Instructor (optional) _____

List any Special accommodations (or restrictions) _____

Requested Start date (approximate) of Internship _____

Please attach a copy of your resume or a brief listing of your work history to this application.

Accepted
 Denied ☹️ reasons: _____

Campus Director _____ Date _____