

# Internship Workshop Registration

Print Name: \_\_\_\_\_

(PRAX 201-Internship Workshop for .50 unit)

Student ID: \_\_\_\_\_

Class Year: \_\_\_\_\_

## IMPORTANT INFORMATION

- Students are expected to register by the end of the add period for any given semester; exceptions may be approved, provided there is sufficient time to complete all requirements by the end of the semester or summer. However, students **MUST register prior to the beginning of their internship work hours, no exceptions.**
- You **DO NOT** need a faculty sponsor—Career Works staff will serve as your sponsor.
- If you are an international student (F-1/J-1), you must get a signature from the Office of International Student Services.
- Credit: A minimum of 45 hours on site is required. The course will be graded Credit/No Credit.
- This course counts towards the E graduation requirement, which requires 1.0 credit. Students must complete other E-designated courses to complete the E requirement.
- Return completed form to the Registrar's Office. You **do not** need to turn in an add/drop card.
- Your registration will show up in the Portal once processed. You and Career Works will receive a PDF copy of your form.
- The **special summer tuition** rate only applies to a maximum of 2 summer units of field experience/internship or special project credit during a student's time at Beloit College.
- If you have any questions, contact Career Works at 608-363-2675 or [careerworks@beloit.edu](mailto:careerworks@beloit.edu).

## REGISTRATION INFORMATION

Major(s): \_\_\_\_\_ Minor(s): \_\_\_\_\_

Year & Term: \_\_\_\_\_ Pay:  PAID  UNPAID Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Internship/Position Title: \_\_\_\_\_

Field Site/Organization Name: \_\_\_\_\_

Site Street Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Site Supervisor Name: \_\_\_\_\_ Site Supervisor Title: \_\_\_\_\_

Site Supervisor Email: \_\_\_\_\_ Site Supervisor Phone: \_\_\_\_\_

Experience was found through an alumni connection (if checked) Alumni Name: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Career Works Instructor Name (print legibly) \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Academic Advisor Name (print legibly) \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Office of International Student Services Signature for International students \_\_\_\_\_ Date \_\_\_\_\_

### REGISTRAR'S OFFICE USE ONLY

Processed By and Date: \_\_\_\_\_

Previous Special Project/Internship Units Completed: \_\_\_\_\_