

**STUDENT INTERNSHIP INTEREST FORM**  
**(To be completed by student for meeting with faculty)**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Email: \_\_\_\_\_

Major: \_\_\_\_\_ Minor: \_\_\_\_\_

Number of credits completed in CST at end of present semester: \_\_\_\_\_

Average GPA in CST: \_\_\_\_\_ Hours Completed: \_\_\_\_\_ Expected Grad. Date: \_\_\_\_\_

Semester/Year for which internship is desired: \_\_\_\_\_

Number desired intern credit hrs: \_\_\_\_ (3 s/h=90 intern hrs); \_\_\_\_ (6s/h=180 intern hrs)

Type of internship position desired and/or description of skills which you want to develop/apply in the internship:

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1.        **Specific CST courses related to this area**                      **Faculty instructor**

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2.        **Any related work/personal experience?**

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3.        **Agencies to which you have selected to apply or to which you are thinking of applying?**

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**(Attach Degree Evaluation from Genie)**