



Internship Application and Approval Form

Directions: Students must mail, fax, e-mail, or hand-deliver the completed form, along with a resume, at the start of the semester in which the internship will take place.

Reta Wilmore, Director
Experiential Learning & Career Engagement
Tennessee State University
College of Business
330 10th Avenue North, Suite H409
Nashville, Tennessee 37203-3401
Phone: (615) 963-7170; Fax: (615) 963-7139; E-mail: rwilmore@tnstate.edu

Student Name: _____ "T" Number: _____

Course Number: _____ Internship Semester & Year: _____

Local Address: _____

City: _____ State: _____ Zip Code: _____

E-mail Address: _____ Phone: _____

Internship Host Organization Information

Host Organization: _____

Host Site: _____

Host Site Supervisor: _____

Title: _____ Phone: _____ E-mail: _____

Signatures

I, _____, agree to represent Tennessee State University's College of Business in an exemplary, professional manner and to guard all business information I am exposed to with the highest degree of confidentiality.

Applicant Signature Date

Departmental Approval: This internship has been approved for appropriateness to receive academic credit in the above indicated course.

Department Chair Date