

Agreement/Approval Form for Internship & Practicum

Student Name (Last, First)		Student Number	
Email Address		Local Phone Number	
This stud	dent has my permission to enroll in:		
	<u>Internship</u>		<u>Practicum</u>
	CIM 494 (Internship in Cinema and Interactive Media)		COM 302 (Structured Research and Practice at SOC Consultancy)
	COS 498 (Communication Studies Internship)		COS 405 (Practicum in Communication Studies)
	JMM 495 (Internship in Journalism and Media Management)		JMM 300 (Journalism Practicum) STC 438 (Practicum in Advertising)
	STC 380 (Advertising Internship)		STC 439 (Public Relations Practicum)
	STC 381 (Public Relations Internship) Other:		Other:
	(fill in approved # of credits, 1 to 3)		
member semeste	understanding that the student will fill out the of the student's choice. It must be returned or of enrollment. Please attach correct contraction and processing.	to me b	y the "Last day for Registration" of the
	Approving Faculty	Membe	er/Chair