DUE DATE: ___________________

PLEASE NOTE:
STUDENTS MUST RETURN THIS COMPLETED FORM TO THE CAREER CENTER WHEN REGISTERING FOR ACADEMIC CREDIT.
This form must be completed and submitted to the Career Center by the end of the first day of class during J-term and by the add/drop deadline for all other terms.

Part A: STUDENT INFORMATION

Name (Print) Luther Student I.D. Number Graduation Year SPO

Major(s) Cell Phone E-mail Address

☐ Check here if you are dependent of staff or faculty

Part B: SITE INFORMATION

Name of Company/Agency Site Phone

Site Address (Street Address) City State Zip

Site Supervisor Title

Student’s Address During Internship

Part C: DESCRIPTION OF INTERNSHIP (Please attach a copy of a position description if available.)

Student Signature Date

Part D: REGISTRATION INFORMATION – To be completed BY faculty supervisor

Term & Year of Registration:

☐ Fall 20 ______  ☐ J-term 1 20 ______
☐ Semester
☐ Block 1
☐ Block 2
☐ Spring 20 ______
☐ Semester
☐ Block 1
☐ Block 2

☐ Summer 2 20 ______
☐ Block 1
☐ Block 2

See Summer Registration Information Below

A. Grading Options: ☐ Credit/No Credit (380) ☐ A/F (381)

B. Number of Credits1 ________ (minimum of 36 contact hours per credit)

C. Department awarding credit______________________________

1 For January Term Internships Only: Students seeking to satisfy the "J2" requirement should be reminded that the experience must be 2 credits.

2 SUMMER: SPECIAL REGISTRATION: One (1) flat fee for 1, 2, or 4 Credits of Internship. Go to Registrar’s Office to complete Summer Registration.

Faculty Supervisor Name (Print) Faculty Supervisor Signature Date

Career Center Signature Date Registrar Signature Date

WHITE COPY – REGISTRAR YELLOW COPY – CAREER CENTER PINK COPY – INTERNING STUDENT

CAREER CENTER USE ONLY: ___ LP ___ MPE ___ FE ___ SE ___ N/A