## OAKLAND UNIVERSITY COMMUNICATION PROGRAM INTERNSHIP APPLICATION FORM

Date: Academ	nic Term:	Grizzly Number:	
Name:			
Address:			
Telephone: (Home)	(Cell)	Email:	
Email Address:	Is this your first	or second internship:	
Class Standing: Junior Senior	Overall GPA	GPA in the major	_
Students must visit Career Services to of the person who reviewed your mater			ase list the name
What type of internship are you interes	sted in? Be specific.		
What are your goals for the internship?	Be specific.		
→IMPORTANT NOTE:  (1). Because the on-site internship su members, friends, or those with whom	E		
(2). Students may not repackage the current employer or on their employer'	=		
(3). Students may not gain credit for oversight.	an internship that stu	udents previously completed	without approval and/or
(4). It is the student's responsibility to	seek out and be aware	e of the employer's and OU's	policies and procedures.
(5). This internship must be conducted setting ("field work" or unsupervised w	•		nip supervisor in an office
(6). It is the student's responsibility to communication internship director's ap a passing grade for the internship. Realimited to: failure to comply with the workplace, being fired from the job, or	proval of an internship asons why credit or a p employer's or OU's po	o does not mean that the stu passing grade may not be gra plicies and procedures, inap	dent will receive credit or anted include, but are not
$\rightarrow$ By signing this form, I am attesting and that the information I have provide		· ·	ate the indicated policies,

Date

Student's Name