Application for SOC 498: Sociology Internship

NAME:			DATE:	
Last	First	Middle Initi	ial	
PID:	CLASS:	MAJOR:	CUM. GPA:	
SEMESTER:	SOC 498 CREDITS: _		(Completion of 3 credits of SOC 498 fulfills the College Experiential Learning Requirement)	
1. INTERNSHIP ORG	GANIZATION (name, postal a	.ddress, website address [[as applicable]; description of mission)	
2. INTERNSHIP ACT	TIVITIES (expected responsibi	ilities and activities)		
3. PREPARATION (r	relevant course work, readings,	work experiences, etc.)		
4. EXPECTED SKIL!	LS DEVELOPED (methodolog	gical, analytical, commur	nication, etc.)	
5. PRIMARY SUPER	RVISOR IN INTERNSHIP OR	GANIZATION		
NAME:	E-MA	AIL:	PHONE:	
STUDENT'S SIGNA	TURE		PHONE:	
		APPROVALS		
			OFFICE USE ONLY	
Sociology Academic Advi	isor Date	2	successful completion of	
Sociology Chair	Date	 >	this SOC 498 fulfills the	