Submit this form no later than the last day to drop with a full refund in a given semester (usually 10th day of semester—check the academic calendar). Be sure to attach a description of the internship and what you hope to achieve through the job. After you complete the course, you must submit an Honors Credit Completion Form with signatures.

**Student Information**

Student Last Name: ___________________________  Student First Name/MI: ___________________________

Student Telephone: ___________________________  Student Email: ___________________________

Student ID (A-number): ________________________

Semester you intend to graduate (circle): SP SU FA  Year: __________________________

**Course Information**

HON 400  -  CRN: ________________

Semester you’re taking the course (circle): SP SU FA  Year: __________________________

**Contract Course Instructor Information**

Supervisor Name: ____________________________

Telephone: ____________________________  Email: ____________________________

*Give us a brief description of the internship and what you hope to achieve (attach pages):*

**Approvals:** Supervisor and student have read and understood the guidelines for the Honors Internship.

Student: ____________________________  Date: ____________________________  (Signature)

Supervisor: ____________________________  Date: ____________________________  (Signature)

Honors College Dean: ____________________________  Date: ____________________________  (Signature)