

Proposal for Internship with a Professor (4285)

Complete this form, obtain faculty signature, and attach an outline of your proposed research by the add deadline for the selected term. Electronic signatures can be accepted only if form is sent through the Mitchell Hamline email system. The Office of the Registrar will seek approval from independent research coordinator.

Effective Fall 2018, students must be in good academic standing to participate in an internship with a professor.

Return completed form to the Registrar's Office (registrar@mitchellhamline.edu or Room 120).

Date: _____

Name: _____ ID#: _____

Phone Number: _____ Email Address: _____

Supervising Professor: _____

Number of Independent Research credits requested: (1-2) _____

Semester: Fall Spring Summer Year: 20_____

Has this project made use of any previous writing done to fulfill the requirements of another course? Yes No

GPA at the time of registration _____

I have read the Internship with a Professor course description and have attached a proposal that: (1) describes the project(s) I will be working on; (2) explains the specific tasks I will be completing; and (3) lists my learning objectives for the semester.

Student Signature: _____ Date: _____

I have agreed to supervise this project.

Professor's Signature: _____ Date: _____

This Proposal is: Approved Rejected

The following changes are required for approval:

Independent Research and Internship with a Professor Coordinator

Date

Office use only

Date received _____

Good Standing _____

Date processed _____

Completed by _____

Updated January, 2021