

# INTERNSHIP FORM

Updated July 8, 2024

Complete and submit this form to the **Career Experience Coordinator** (Career Services) or your internship course instructor when you have an internship and are seeking to obtain academic credit. Please note that your academic department may have additional forms for you to complete.

Student Name (Last, First, Middle): \_\_\_\_\_

M Number: \_\_\_\_\_ Murray State Email: \_\_\_\_\_

Preferred Phone #: \_\_\_\_\_ International Student ☐ Yes (I will use CPT) ☐ No

Is this the final semester of your current degree? ☐ Yes ☐ No Date of Graduation: \_\_\_\_\_

Classification: ☐ Freshman ☐ Sophomore ☐ Junior ☐ Senior ☐ Graduate Student

College \_\_\_\_\_ Department: \_\_\_\_\_

Area/Major: \_\_\_\_\_ Major 2: \_\_\_\_\_

I am seeking credit through ☐ Academic Department ☐ Career Services

Semester ☐ Spring ☐ Summer ☐ Fall Year \_\_\_\_\_

Internship Instructor of Record: \_\_\_\_\_

Internship Course Name: \_\_\_\_\_ Internship Course Number: \_\_\_\_\_

Internship Title: \_\_\_\_\_ Internship Dates: \_\_\_\_\_

Organization: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Supervisor Email: \_\_\_\_\_ Supervisor Phone: \_\_\_\_\_

Please check to confirm you have taken care of the following (as is applicable):

- ☐ **Financial Aid:** 500 Sparks Hall | msu.sfa@murraystate.edu | 270.809.2546 (If applicable. How will my financial aid be affected?)
- ☐ **Scholarships:** 500 Sparks Hall | msu.scholarships@murraystate.edu | 270.809.3225 (If applicable. How will my scholarships be affected?)
- ☐ **Housing:** 206 Stewart Stadium | msu.housing@murraystate.edu | 270.809.2310 (Inquire if applicable.)
- ☐ **International Studies:** Misty Brown Lanham | 101 Pogue Library | mbrown@murraystate.edu | 270.809.2964 (Inquire if applicable.)

Please confirm that you understand the following statements:

- ☐ If applicable, I understand that I must pay for the course by the hour (summer).
- ☐ I understand that I am earning credit concurrent with time of employment.
- ☐ I understand that it is my responsibility to inform the employer of any special assistance needed to perform a job due to a disability.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

This section must be completed and signed by the Career Experience Coordinator (Career Services).

- ☐ Student is currently enrolled and degree seeking ☐ Student has earned at least six (6) credits at MSU
- ☐ Student has 24+ credits (or will before intern begins) ☐ GPA is 2.0 or higher

Notes: \_\_\_\_\_ Current GPA: \_\_\_\_\_ Hours Earned: \_\_\_\_\_

Career Experience Coordinator Signature: \_\_\_\_\_ Date: \_\_\_\_\_