



Application for Internship - MIS 755

PART 1: TO BE COMPLETED BY THE STUDENT. Please type or legibly print in the required areas below. This application must be submitted and approved prior to registration.

Name: _____

NSHE# _____

UNLV e-mail: _____@unlv.nevada.edu

Date: _____

Phone number: _____

Current Major: _____

Request is for (circle one): Fall Spring Summer II Summer III

Year: 20_____

Please type or legibly print details of the proposed internship. Be specific and succinct and sign and date below. Attach any necessary documentation required by the application process.

Applicant signature

Date

PART 2: FOR MET DEPARTMENT USE ONLY. The application is not approved until all signatures are present.

Graduate Coordinator: _____
Print

Sign

Internship Coordinator: _____
Print

Sign

Department Chair: _____
Print

Sign

Completed on: _____