



Internship Registration Form
 THA 6001

This form is to be completed, signed by the student and faculty supervisor, with copies to the departmental secretary and graduate advisor. The original form will be kept on file in the main office.

NOTE: The student will not be registered for the course until all paperwork has been completed, copies have been distributed, and the original has been submitted to the departmental secretary.

Course Number: TH A 6001. _____ (____ credit hrs.) Term: Fall Year: _____
(section) Spring
 Summer I
 Summer II

Name: _____ R#: _____

Address: _____

Phone Number: _____ E-Mail: _____

Faculty Supervisor: _____

Director or Production Supervisor (if applicable): _____

Title of project: _____

Brief description of project: _____

Brief description of evaluation method to be used in assigning grade: _____

Books or other references for which the student will be accountable: _____

STUDENT SIGNATURE: _____ DATE: _____

FACULTY SIGNATURE: _____ DATE: _____

Please attach additional paperwork to this form.