INTERNSHIP APPROVAL FORM

University of Detroit Mercy
College of Humanities, Arts & Social Sciences

Used to provide Instructor Approval (SPECIAL) to individual students for LAC 3100, LAC 3200, LAC 3300.
Submit form to Internship Coordinator: Prof. Sigrid Streit (streitsi@udmercy.edu).
THE COLLEGE WILL ENTER THE OVERRIDE PERMISSION IN BANNER (SFASRPO) AND THE STUDENT CAN THEN REGISTER FOR THE CLASS. Keep for your records if necessary.

STUDENT INFORMATION:

Student ID Number: T0_____

Name: _____
Last First Middle Initial

Student College: ☐ CHASS ☐ Other

Student Major: _____ Student Minor: _____

Student Level: ☐ UG ☐ GR

SEMESTER AND COURSE INFORMATION:

(Check all that apply.)

☐ Fall ☐ Winter ☐ Summer Year 20_____ - 20_____

☐ LAC 3100 ☐ LAC 3200 ☐ LAC 3300

If the student is receiving permission for LAC 3300, a Departmental Mentor must be assigned.

Departmental Mentor Name: _____

Departmental Mentor Disclaimer (LAC 3300):
I agree to meet with the student and provide periodic and timely feedback on their internship portfolio. I agree to return my evaluation of the student's portfolio to the Internship Coordinator by the designated date. The faculty mentor will bank 1 (one) chit for their work with the student.

Student Signature: _____ **Date:** _____

Department Signature: _____ **Date:** _____

Internship Coordinator Signature: _____ **Date:** _____

Dean's Office Signature: _____ **Date:** _____

Override Entered in Banner (AppNav) Date: _____