

UAH Internships
College of Business Administration

Faculty Coordinator of Internships
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Application for Office of Academic Assistance Internship Approval

Application for: **Fall** **Spring** **Summer** **Year**_____

Date:_____

Name: _____ **Student A Number**_____

Class: _____ **Major:** _____ **GPA:**_____ **Graduation Date**_____

Cell or Contact Phone Number:_____ **Email**_____

For Academic Assistance Use Only

Approved:_____ **Date:**_____

Disapproved:_____ **Date:**_____

Comments: