INTERNSI APPLICA	М		Department of English		
NAME:			DATE:		
LOCAL Address			ID #:		
PHONE:	EMAI	L:			
Are you an English or Crea	ative Writing major?	YES	NO		
Class Year and Semester (CIRCLE ONE)	2ND SEMESTER JUNIOR		SEMESTER 2ND SEMESTE SENIOR SENIOR		
If you are <i>not</i> an English of your junior year or a senio					
List, by title, English or Creativ	e Writing courses taken and	the final gr	ade.		
1	COURSE		F	INAL GRADE	
5					
6					

On a separate sheet of paper, please write a one-to-two page typewritten statement on why you are applying for an internship and describe how your skills as an English major are suited to the internship you have found.

You may take up to 12 hours of internship, but no one internship may count for more than four hours. Internships taken over the summer count for one hour applied to your fall schedule. All internships must require you to work at least 10 hours per week. **Please note that internship credits do not count towards the English major**. Internship credits must be taken using the Satisfactory/Unsatisfactory grading option. Grades are based on an evaluation from your internship supervisor and a paper written for the internship advisor.

NAME OF COMPANY	
SUPERVISOR'S NAME	
TITLE	
STREET ADDRESS AND SUITE	
CITY AND STATE	
ZIP CODE	

Return this form with a sample of your writing from a previous English course to:

Director of Undergraduate Studies Department of English Callaway N302 Tel: (404) 727-6420 Fax: (404) 727-2605

See the Director of Undergraduate Studies before the end of add/drop in order to register for English 496. Be sure that the correct number of hours appears on your schedule.

SUPERVISOR'S DESCRIPTION OF PROPOSED INTERNSHIP PROJECT

After talking with the prospective intern, please respond to the following questions and return this completed form to Director of Undergraduate Studies, Department of English, Emory University, Callaway N302, Atlanta, GA 30322. Fax: (404) 727-2605. http://english.emory.edu/undergrad/forms.htm

NAME OF INTERN _____

Approximately how many hours per week will the intern be scheduled to work?

Please describe the project(s) on which the intern will work. Please also describe the duties the intern will have in connection with this project; the skills, abilities, or talents required; the skills or abilities you hope the intern will develop, and any additional information you find relevant.

What are some of your criteria for evaluating the performance of the intern at the end of the semester?

Do you have any specific requirements or concerns?

Thank you. We appreciate your interest you interest in our Internship Program and look forward to answering any questions you might have.

Your Name:				
Title:				
Company Name:	 			
Address:	 			
City:	 	State:	Zip:	
Telephone:	 			
Fax:				
Email:				