Internship Course Request (484/684)

Student name: ____________________________

UIN: ____________________________ Major: ____________________________

Course Information:

Term: ____________________________

Course prefix: ____________________________ Course number: ____________________________

Number of credit hours: ______

Grade mode: [ ] Graded [ ] Pass/Fail

Course completion date (if different than the standard term): ____________________________

Degree requirement: [ ] Elective course [ ] Substitution of credit for: ____________________________

Description of course:

Assignments, tasks, and responsibilities:

Grade assignment will be based upon:

Student Approval

Student Signature: ____________________________ Date: __________

Departmental Approval

Instructor Signature: ____________________________ Date: __________

Instructor UIN: ____________________________

Student's Department Head Signature: ____________________________ Date: __________

Department Head of the Course Signature: ____________________________ Date: __________

Processing

Section Request Submitted Date: ______ CRN Assigned to Course: ______ Entered By: ______ Date: ______

Student UIN can be found at https://myrecord.tamu.edu