

INTERNSHIP PROGRAM APPLICATION FORM

Kindly fill all fields below clearly and sign this form before you submit it to the Career Services Coordinator

Student Name		College	
Student ID		Major	
Nationality		E-mail	
Total Earned Hours		Phone	
Total Registered Hours		Internship Semester	
Cumulative GPA			

Student Signature		Date	
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Note:

Registrar's Office, please check the appropriate box for each condition below and comment in the space provided:

- | NO | YES | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <i>Student is currently enrolled at PMU</i> |
| <input type="checkbox"/> | <input type="checkbox"/> | <i>Student was enrolled in the previous semester</i> |
| <input type="checkbox"/> | <input type="checkbox"/> | <i>Student has completed successfully 90 credit hours and above</i> |
| <input type="checkbox"/> | <input type="checkbox"/> | <i>Student is in good academic standing</i> |
| <input type="checkbox"/> | <input type="checkbox"/> | <i>Student finished all college requirements (College Core)</i> |
| <input type="checkbox"/> | <input type="checkbox"/> | <i>Student finished ASSE I & II (COB Students)</i> |

Registrar's Office Signature	
<i>The Registrar Office confirms the information above.</i>	
Registration Officer Name	
Registration Officer Signature	
Date	

Career Services Coordinator	
Signature	
Date	

Note:

- Students may be registered for the internship course along with other courses. However PMU is not responsible for any scheduling conflict nor logistics.
- This form is only an application form for the internship and cannot be considered as a registration for the internship course. Students must register for the internship course through Banner after getting the approval.
- Students should be committed to the time period and place of the internship requested on this form unless changes made for severe circumstances, beyond the student's control and at the discretion of the Dean of Student Affairs or his designee.

Dean's Office/ Designee		
Comments		
<input type="checkbox"/> Approved <input type="checkbox"/> Declined	Name of Dean / Designee	
	Signature	
	Date	

Company accomodated for internship	
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Division of Student Affairs		
<input type="checkbox"/> Approved <input type="checkbox"/> Declined	Name	
	Signature	
	Date	