

HONORS COLLEGE

INTERNSHIP PROPOSAL FORM

Instructions: Please complete and submit to the Honors Blackboard by the twelfth class day.
Contact us if needed at 936-294-1477 or HONORS@SHSU.EDU

Please print legibly.

Note: internship hours must be part of course requirements.

Student Information:

Name: _____ SAM ID: _____
 SHSU Email: _____ Subject/Course (EX: POLS 2301) up to 6 hrs: _____ Section: _____
 Course Title: _____ Semester: Fall Spring Summer 20_____

Internship Information:

Type of Internship: _____ Supervising Faculty: _____
 Faculty Email: _____ Dates: _____ Location: _____

Please note: supplemental documentation may be requested upon review of this form.

Internship Information:

Please describe the details of the internship and explain how it will enhance your Honors experience:

- **I agree to enroll in and complete this course for Honors course credit by meeting the regular course requirements.**
- **I understand that in order to receive Honors course credit, I must earn a grade of "A" or "B" in the course.**
- **I understand that in order to receive Honors course credit, I must submit an Internship Certification Form by the stated deadline in Blackboard.**

Student Signature: _____ Date: _____

Instructor Signature: _____ Date: _____

Approved proposals will be reviewed by Department Chairs

Department Approval:

Honors College Dean Signature: _____ Date: _____