

# HONORS COLLEGE

## INTERNSHIP PROPOSAL FORM

**Instructions:** Please complete and submit to the Honors Blackboard by the fifth 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: \_\_\_\_\_  
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:

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- **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: \_\_\_\_\_