

Student Signature: _____

Application for UNIV 490 Career Internship

Bachelor of Arts in General Studies (BGS) Degree Program

Bachelor of Arts in General Studies Malpass Library Third Floor Western Illinois University 1 University Circle Macomb, IL 61455 Phone: 309/298-1929

Phone: 309/298-1929 www.wiu.edu/BGS

Please type or print clear	ly	Date:	
Your Name:		WIU I.D. #:	
Home Address:	Street Address		_
	Street Address	City, State	Zip
Email:		Telephone:	
Internship Company Nan	ne:		
Address/Location:			
Supervisor:	Street Address	City, State Email and Telephone:	Zip
Number of semester hours	completed toward BGS:		
Anticipated semester/year	of graduation:		
Number of semester hours	requested for internship	(40 work hours equals 1 SH of cred	lit):
Date of Internship	Fall 20	Spring 20	Summer 20
Explain how previous cour	rses and/or prior learning	have propored you for this internal	nip experience and hov



Proposed Internship Training Schedule

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Please type or print c	learly	Date:	
Your Name:		WIU I.D. #:	
Semester Hours request (40 working hours equa	ted for UNIV 490 als 1 SH of credit):		
Internship Start Date:	Note: One week of full-time, co	Internship End Date:	semester hour of credit)
Internship Company	y Name:		
Address/Location: _	Street Address	City, State	- <u>-</u> Zip
Supervisor:	Silver Fiduless	•	Zip
		Email:	
		ollege-level internship duties and resent job duties and responsibilities.	sponsibilities.

Approval by Internship Supervisor:

Company Supervisor's Signature:	
Company Supervisor's Name and Title	
(Please Print):	
Intern's Signature:	

Coordinator/Instructor's Approval Prior to Registration:

This form must be completed and returned with the Application for UNIV 490 Career Internship to:

University 490 Internship Coordinator Bachelor of Arts in General Studies Malpass Library Third Floor Western Illinois University 1 University Circle Macomb, IL 61455

Email: BGS@wiu.edu