

## ARTHI 192E Off Campus Internship Proposal Application

	Student Information	
Date:	PASS / NO PASS ONLY	No. of Units:
	<u>UNITS</u> : Max 4 units/quar	rter; 12 units total in ARTHI 192 A-E
Student Name:		Perm Number:
Last Name	First Name	
Student Email:		_
Major/Minor:		Project Quarter:
	our units earned through 192D/E may be applied erwise may <b>NOT</b> be applied to the History of Art 8	
Expected Graduation Date:	GPA:	(3.0 Minimum)
FACULTY SUPERVISOR:	Email:	
INTERNSHIP Site & Address:		
INTERNSHIP SUPERVISOR:		
Phone Number:	Email Address:	
-	nd basic plan, any research involved, and ba	asic contract.
Minimum Requirements:	original of the guester and as required	
	eginning of the quarter and as required se, indicating goals and number of hours wo	rked
Work on site: 3 hours/week/unit (Tota	= =	
Description of Duties:		
Note to Internship Supervisor: Please en	nail a brief evaluation of the intern's work, i	ndicating whether it was of passing
quality, and total hours worked to the in:	structor at the end of the quarter. Thank yo	u.
Student Signature:		
Internship Supervisor Signature:		
Faculty Internship Supervisor Signature:		
Department Chair/Advisor Signature:		
	For Department Use Only	
Add Code:	Date Given:	