

TV/R 76 OR 77 REGISTRATION INFORMATION

Date _____

My Name _____

My Home Address _____

City _____ State _____ Zip _____

Home Phone: _____ SS # _____

I want to enroll in or I am enrolled in TV/R 76 TV/R 77

I have COMPLETED _____ Credits as of the start of this term;

and my overall grade point average is _____

CHECK EACH CONDITION THAT APPLIES AND FILL IN THE BLANKS

I will intern at _____

whose address is _____

in _____

City

State

Zip

My Supervisor is _____

and his/her title is _____

and the voice phone number is (_____) _____

and the fax number is (_____) _____

I will intern there _____ days a week. My job will be to:

I don't have an internship yet, but I'm working on it.

I need a letter to my supervisor to confirm I'll get credit

Mail the letter directly to the supervisor

I'll pick it up in the Department Office and mail it myself.

I have a problem. Please call me to discuss it.

I have a problem. I'll see you during your office hours.