

Office Use Only

Exp Grad Dt _____

GPA _____

CR Hrs at Metro: _____

Total hrs _____

Internship Application

Personal Information (Please Print)

900# _____ E-Mail address _____

Last name: _____ First name: _____ Middle Int. _____

Street Address: _____

City: _____ State _____ Zip _____

Home Phone: (_____) _____ Cell Phone: (_____) _____

Major: _____ Minor: _____

Criteria:

The following criteria **ALL** must be met before you will be allowed to participate in a Center for Innovation Internship.

1. Declared a Minor in Entrepreneurship through the Center for Innovation or emphasis in Entrepreneurship through Individualized Degree Program Major (elective only).
2. Completed CFI 1910 Creative Problem Solving (or approved course) and CFI 2910 New Venture Feasibility (or approved course) or two approved entrepreneurship courses.
3. Have junior standing.
4. Have a 2.5 GPA.
5. Completed the Center for Innovation Internship Workshop prior to the semester doing the Internship.

Read and Initial the following declarations:

_____ I understand that it is mandatory to get academic credit for unpaid/paid internships. I also understand that standard tuition and fees apply;

_____ I agree to return all calls from employers and to represent myself and the Center for Innovation Metropolitan State College of Denver in a professional manner;

_____ I will let the Internship Center know when I am offered an internship position. I will also talk to The Internship Center before I quit or leave a position;

_____ I agree to host The Internship Center coordinator for a site visit and to fill out an end of semester evaluation form;

_____ I understand that I must maintain a 2.5 GPA and carry at least 12 credit hours per year to maintain eligibility for an internship, and;

_____ I understand that it is my responsibility to find a small business owner who will allow me to do an internship with him or her.

I agree to the following requirements for the Center for Innovation Internship and that by signing below, I agree to the terms and conditions of the Metro State Internship Center.

_____ Student signature

_____ Date