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|  | Application Form CIP-3 |

**RETURN COMPLETED FORM TO BRIGID BEACHLER, MANAGING DIRECTOR, 119 IVES HALL.**

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| **Date:** | | | |
| **Student Name:** |  | | |
| **Ithaca Address:** |  | **Ithaca Phone:** |  |

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| **Term to be off campus:** |  | **Location desired:** |  |

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| **Expected Graduation Date:** |  | **Credit hours completed at the end of this term:** |  |

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| **Course work I will have completed by the end of**  **fall semester or**  **spring semester.** | | | | | |
| **Transfer credits (Attach list of courses transferred.)** | | | | | |
| **Required ILR Courses (check those completed, note any waived).** | | | | | |
| **ILRID 1500**  **ILRLR 1100**  **ILROB 1220**  **ILRHR 2600**  **ECON 1100**  **ECON 1120**  **ILRLR 2010**  **ILRLR 2050**  **ILRST 2100**  **ILRLE 2400** |  | **First Year Writing Seminar I**  **Year Writing Seminar II**  **Western Intellectual Tradition**  **Advanced Writing**  **Cultural Perspectives**  **Science & Technology**  **Labor History Elective**  **International & Comparative Elective**  **Labor Economics Elective** | | | |
| **Previous 4970 or 4980 credit received:** | | |  | **ILR Elective Hrs.** |  |
|  | | | **(40 credits needed – 1 course must be an ILRIC course)** | | |

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| **List courses you are currently enrolled in:** | |
| **Course Title and Number** | **Credit**s |
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| **Name of Faculty Member who has agreed to supervise internship:** | | | | |
| **Student Signature:** |  |  | **Date:** |  |
| **Faculty Signature:** |  |  | **Date:** |  |

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| **It is understood and agreed that approval by the Academic Standards Committee for the proposed internship project in no way constitutes a waiver of any ILR requirements for graduation and that the student remains responsible for meeting all such requirement which remain to be completed.** | | | | |
| **Approved by Managing Director:** |  |  | **Date:** |  |
| **Academic Standards Committee Action:** |  |  | **Date:** |  |