

# Internship Registration Form



University of New Hampshire  
at Manchester

UNH Manchester Registration Office  
Student Services Suite, 4th Floor  
unhm.registration@unh.edu  
(603) 641-4136

- 1. This form must be completed and signed by Student and Internship Faculty Advisor for permission to register for an internship course.***
- 2. Return this form to the Registration Office for permission to register for an internship and receive academic credit. It must be submitted before the deadline to add courses.***

\*Additional required paperwork will be available on myCourses after registration.\*

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## STUDENT INFORMATION

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_  
UNH ID: \_\_\_\_\_ Major: \_\_\_\_\_  
Phone: \_\_\_\_\_ Wildcats Email: \_\_\_\_\_

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Internship Semester:      Fall                  Spring                  Summer                  J Term      Year: \_\_\_\_\_

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## INTERNSHIP FACULTY ADVISOR INFORMATION

Name: \_\_\_\_\_ Department: \_\_\_\_\_  
UNH Phone: \_\_\_\_\_ UNH Email: \_\_\_\_\_

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## INTERNSHIP INFORMATION

Internship Course (ex. UMST 500): \_\_\_\_\_ CRN: \_\_\_\_\_  
Credits: \_\_\_\_\_ Total On-Site Hours Required: \_\_\_\_\_

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**Please have your Internship Faculty Advisor sign and date below as permission to register for the internship course indicated above. This signature must be completed before registration will be processed.**

\_\_\_\_\_  
Internship Faculty Advisor

\_\_\_\_\_  
Date