

**INTERNSHIP / PRACTICUM
APPLICATION FOR REGISTRATION**

**UNIVERSITY OF NEW HAVEN GRADUATE SCHOOL
Master's in Industrial and Organizational Program**

Complete this form and return it to Dr. Sidle or the graduate assistant TWO WEEKS prior to registering for P693/P694 or P678/P679.

Check the Internship or Practicum for which you want to register:

Internship 1 (P693) _____

Practicum 1 (P678) _____

Internship 2 (P694) _____

Practicum 2 (P679) _____

Which trimester (Fall, Winter or Spring) and year? _____

Name _____ **SS#** _____

Current Address _____

Telephone Numbers _____ **(home)** _____ **(work)**

Email _____

Organizational Sponsor _____

Student Signature _____ **Date** _____

Program Coordinator Approval: _____ **Date** _____

Faculty Advisor: _____ **Date** _____

Distribution (handled by Program Coordinator)

- | |
|--|
| <input type="checkbox"/> Registrar |
| <input type="checkbox"/> Student |
| <input type="checkbox"/> File |
| <input type="checkbox"/> Psychology Secretary |