

## **JONES COLLEGE OF BUSINESS**

## Business Administration/Management/Business Innovation and Entrepreneurship Intern Application

Student Nan	ne:	MTSU ID #
Hours Completed:		Major:
Semester of	Internship:	Year:
Address:		
Phone:		Email:
	list your personal internship	objectives:
2.		
I agree to:	Work in a company approvement of the Perform in a professional management of the Performance of the Performa	ours for 3 hours of college credit ed by the Internship Coordinator nanner and comply with employing company's ony's confidentialities olio by designated due date to Internship o complete and submit Employer Evaluation of Intern
Student Intern Signature		Date
Intern Coo	ordinator Signature	Date
Departme	nt Chair Signature	Date

Return to: Dr. Kristen Shanine in BAS N143 or email to Kristen.Shanine@mtsu.edu