

**University of Oregon  
Department of Geography  
Internship Registration Form**

Please print out this form, fill it out and gather the appropriate signatures after you have completed the internship contract. Only then will you be allowed to register for internship credit.

Student name: \_\_\_\_\_ 95#: \_\_\_\_\_

Email address: \_\_\_\_\_ Phone number: \_\_\_\_\_

Term: \_\_\_\_\_ 20 \_\_\_\_\_ CRN: \_\_\_\_\_ Course #: \_\_\_\_\_ No. of credits \_\_\_\_\_

Course title (for transcript) *22 characters max, including spaces:*

---

Faculty Supervisor & Internship Coordinator: Signing below indicates that you have approved the Internship contract that this student has proposed, and that it has been signed by the Student Intern, Internship Supervisor and Faculty Supervisor.

Faculty Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Geography Internship Coordinator: \_\_\_\_\_ Date: \_\_\_\_\_

Student: Return this completed and signed form to the Geography Office in Condon 107. You will then be pre-authorized to register for the course. It is ultimately your responsibility to ensure that you register for the course through DuckWeb. Remember to change the variable credit option to reflect the number of hours you are expected to work.