



Internship Practicum Application

Please complete the information below and submit to Dr. Eliz Storelli (estorell@gmu.edu) to initiate the registration process for SOCI 416/616. This application must be submitted by the deadline to add courses for the semester in which registration is requested.

Registration Information

Semester/Year: _____ Credits requested (1-6): _____

Student Information

Full Name: _____

G#: _____ Email address: _____

Phone number: _____

College standing (BA/MA/PhD and how many years you've been enrolled): _____

Total Credit Hours Completed: _____ Total Credit Hours Completed in SOCI: _____

GPA (Overall): _____ GPA (in major): _____

Internship Information

Organization Name: _____

Organization Address/Location: _____

Organization Contact: _____

Role Title: _____

Start date – end date: _____ Hours per week: _____

How did you learn about this opportunity? _____

Internship Description (Please provide an overview of the work you will be doing and how this relates to your degree. Feel free to use the space here or add an extra page):