Interdisciplinary Studies Experiential Learning Application

Please email a LEGIBLE scanned copy of this completed application packet to the Interdisciplinary Studies Graduate Coordinator at mais@gmu.edu. NOTE: To save your edits, download the file first, then open it directly from your computer to complete.

Student Information									
Student Name									
G Number				Ema	ail				
Concentration									
Experiential Learning	Site Information								
Site Name									
Site Website									
Type of Work									
Experiential Learning	Course Information	on							
Course Prefix,									
Number, & Title Enrollment Term				Nur	mhor of (Prodits.			
					Number of Credits				
Instructor of Record				Insti	Instructor Email				
Note: Course Credits	Per On-site Hours	;							
		dents must work a minimum number of hours to earn each course							
On-site Hours (60 minutes per hour) Credits		Minimum of 37.5-5		-50	Minimum of 75-1 2		100	Minimum of 11 3	2.5-15
			<u> </u>				<u> </u>		
How did you identify	your experiential	learning	site?						
Signing this form affirm									0
the site supervisor and their site for poor perf			•					their duties by	
Student Signature/Date									
Site Supervisor Signature/Date									
Instructor of Record S	iignature/Date								
Concentration Head									
Interdisciplinary Studie	es Signature/Date	e							