



University at Buffalo

College of Arts and Sciences

# Graduate Internship Registration Request

To register for an internship, you must complete this form and have it approved and signed by the Faculty Member who will be supervising you. Bring the completed form and your identification to Maria Portera, 380 Academic Center (Ellicott Complex). One credit hour requires 40 hours of work time.

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Local Address: \_\_\_\_\_ (apt. #) \_\_\_\_\_  
\_\_\_\_\_ (State) \_\_\_\_\_ (Zipcode)

Person #: \_\_\_\_\_ E-mail: \_\_\_\_\_

Program \_\_\_\_\_ AHI 598 Museum Studies Int. \_\_\_\_\_ AAP511 Fieldwork in Arts Mgmt  
MA \_\_\_\_\_ APY538 (Biehl) Fieldwork

Registration #: \_\_\_\_\_ Credits: \_\_\_\_\_ Faculty Advisor: \_\_\_\_\_

Internship Location, Name, Address, Telephone, E-mail of Organization (Please print):

\_\_\_\_\_ (Email)  
\_\_\_\_\_ (Telephone)

Duties: \_\_\_\_\_ Hours per week you will work: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Indicate what you plan to learn and accomplish through this internship (continue on reverse if necessary):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Faculty Sponsor: (Signature) \_\_\_\_\_ Date: \_\_\_\_\_

Organization Representative: \_\_\_\_\_ Date: \_\_\_\_\_

Department of Anthropology (Signature) \_\_\_\_\_