INTERNSHIP ELIGIBILITY QUESTIONNAIRE: ORG COM OPTION

Please complete the following questionnaire so that your internship eligibility can be evaluated. If you are eligible, you will need to complete an Internship Contract and make an appointment with Dr. Kallan to discuss it.

Name: ________________________________ Curriculum Year: ____________

Bronco#: ______________________________ Phone Number: ____________

Email: ________________________________

Number of units completed: _______ Current overall G.P.A.: ____________

Please check each of the required courses listed below that you have completed (you must have completed at least four):

- COM 103 Interpersonal Communication
- COM 201 Intro to Communication Theory
- COM 314 Organizational Communication
- COM 325 Persuasion and Communication
- COM 327 Intercultural Communication

To be completed by the Communication Dept:

Verified by: ________________________ Date: ________________________

Eligible for Internship: Yes □ No □

Appointment time (arranged by Lyn) with Dr. Kallan: ________________________

Notes: __________________________________________________________________