DANC 425 – Dance Internship Proposal

Student Name: ________________________________
Academic Advisor: ____________________________
Semester of Enrollment: _______________________
Internship Location: __________________________
Internship Supervisor: _________________________

Amount of Credit:
3 hours/week – 1 credit
4.5 hours/week – 2 credits
6 hours/week – 3 credits

Briefly describe your goals for the internship and list any responsibilities if they are known at this time. At the end of the internship, you must have your supervisor complete the Dance Internship Evaluation Form found online at: http://dance.illinois.edu/current-students-and-faculty/online-forms and submit this to your advisor.

The following signature is required before submitting the form to the Dance Office.

Academic Advisor: ____________________________

A copy of the approved form should be given to the student and the original put into the student’s file.