## Request to participate in ANTH 498, Anthropology Internship

## Department of Anthropology

I,	(student's name)		_ (student ID number)], request to
participate in ANTH 498 for	(number) semester ho	ours during the:	
Fall S	pringSummer	(CHECK ONE)	
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Name of FACULTY DIRECTO	OR OF STUDY:		
Name, address & phone number	er of AGENCY or BUSI	NESS at which inter	nship experience will
occur:			
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Name of DIRECT SUPERVISO	OR:		
STUDENT PERFORMANCE:	(S. F. grading)		
(Insert internship descript			
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SIGNATURE of AGREEMEN	$oldsymbol{\mathrm{T}}$ (The signatures below indic	cate mutual agreement as	specified above):
Signature of STUDENT:			
Signature of FACULTY DIRECT	FOR OF STUDY:		
Signature of DEPARTMENT CH	IAIR:		TO SERVICE THE PROPERTY OF THE
Signature of AGENCY SUPERV	TSOR:		TO THE PARTY OF TH
•			
Distribution: Study Director and/or Student Advisor	•		
Student Chair			