LINCOLN UNIVERSITY 401 FIFTEENTH STREET, OAKLAND, CA 94612

BA 383 — GRADUATE INTERNSHIP IN GENERAL BUSINESS PROPOSAL APPROVAL FORM

STUDENT'S NAME (Last Name, First Name)	STUDENT I.D. NUMBER
TELEPHONE	E-MAIL
CURRENT TERM (Fall, Spring, Summer / Year)	PERIOD FOR INTERNSHIP
1. INTERNSHIP COMPANY NAME AND ADDR	RESS
2. INTERNSHIP POSITION AND A BRIEF DESC	CRIPTION OF YOUR DUTIES
3. NAME OF PROPOSED FACULTY ADVISOR	
graduate faculty available for the term (see catalog	siness (BA 383) should be selected from the university or website). If you cannot select an advisor, or if the alt the Dean/ Provost/ President. If you decide to change val from the Dean/ Provost/ President.
4. STUDENT'S SIGNATURE	
(Student's Signature and Date)	
5. I AGREE TO REVIEW AND GRADE THE RE	PORT.
(Advisor's Signature and Date)	

6. ARE YOU CHANGING YOUR ADVISOR OR INTERNSHIP? YES NO

If "NO", please get your advisor's signature (#5), get approval on this form from the Admissions and Records office, and submit it to the Registrar's Office.

If "YES", please schedule an appointment for approval of change(s) to your selected advisor and the internship company, fill in this form, get the necessary signatures (#5 and #6b), get approval on this form from the Admissions and Records office, and then submit it to the Registrar's Office.

a. WHO IS YOUR CURRENT ADVISOR AND WHY DO YOU INTEND TO SWITCH ADVISORS?
b. I AGREE TO RELEASE THE STUDENT TO ANOTHER ADVISOR.
(Signature and Date)
c. I DO NOT AGREE TO RELEASE THE STUDENT TO ANOTHER ADVISOR. (Please explain.)
(Signature and Date)
COMMENTS / REMARKS:
APPROVED BY THE RECORDS OFFICE
(Signature and Date)
APPROVED BY THE REGISTAR OFFICE
(Signature and Date)