

**Request to participate in ANTH 498, Anthropology Internship**

**Department of Anthropology**

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I, \_\_\_\_\_ (student's name) [ \_\_\_\_\_ (student ID number)],  
request to participate in ANTH 498 for \_\_\_\_\_ (number) semester hours during the:  
\_\_\_\_\_ *Fall* \_\_\_\_\_ *Spring* \_\_\_\_\_ *Summer* (CHECK ONE)

Name of FACULTY DIRECTOR OF STUDY: \_\_\_\_\_

Name, address & phone number of AGENCY or BUSINESS at which internship  
experience will occur: \_\_\_\_\_  
\_\_\_\_\_

Name of DIRECT SUPERVISOR: \_\_\_\_\_

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**STUDENT PERFORMANCE: (S, F grading)**

The student's performance in this ANTH 498 course will be evaluated by the  
following (choose one or more):

- \_\_\_\_\_ Written Examination \_\_\_\_\_
  - \_\_\_\_\_ Oral Examination \_\_\_\_\_
  - \_\_\_\_\_ Written Report \_\_\_\_\_
  - \_\_\_\_\_ Other, Specify: \_\_\_\_\_  
\_\_\_\_\_
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**SIGNATURE of AGREEMENT** (The signatures below indicate mutual agreement as specified above) :

Signature of STUDENT: \_\_\_\_\_

Signature of FACULTY DIRECTOR OF STUDY: \_\_\_\_\_

Signature of DEPARTMENT CHAIR: \_\_\_\_\_

Signature of AGENCY SUPERVISOR: \_\_\_\_\_

- Distribution:
- \_\_\_ Study Director and/or Student Advisor
  - \_\_\_ Student
  - \_\_\_ Department Chair
  - \_\_\_ Agency