

CCJ 4940 TEACHING INTERNSHIP/PRACTICUM PERMISSION FORM

CCJ 4940 SECTION: _____ **SEMESTER & YEAR:** _____

CREDITS/HOURS (1-3): _____ **GRADED S/U**

STUDENT'S NAME: _____ **UFID:** _____

STUDENT'S EMAIL: _____

SUPERVISING INSTRUCTOR: _____

COURSE NUMBER: _____

NATURE OF ACTIVITIES FOR THE INTERNSHIP: _____

It is critical to honor student confidentiality, so assignments and work related to the internship must not involve access to UFIDs or other confidential matters, like grading where individual students can be identified or maintaining the gradebook. Internship tasks should relate to help with preparation and delivery of the course.

STUDENT SIGNATURE: _____

SUPERVISING INSTRUCTOR SIGNATURE: _____