



**Biology Internship Credit**

Please fill out this form to submit your request to register for a Biology Internship Credit. The deadline to fill out this form is the Friday before the first day of classes for the semester that you are requesting academic credit. Please note that this is a request, and you will be receiving an email to meet and discuss your internship requirements.

A maximum of 4 credit hours of internship/research/independent study can count towards your restricted electives. Anything above this maximum will count towards your free electives.

Name: \_\_\_\_\_ UCFID#(7 numbers, no letters): \_\_\_\_\_ Track: \_\_\_\_\_

UCF Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Semester & Year: \_\_\_\_\_

1. What organization are you looking to intern with?

\_\_\_\_\_

2. Please provide a detailed description of the work you'll be doing.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. How many hours will you be working per week? \_\_\_\_\_

4. Please provide the date range when you will be completing this internship. \_\_\_\_\_

5. How many hours overall do you plan to complete over the course of your internship? \_\_\_\_\_

6. Please provide the name and email address and phone number for your internship/research supervisor.

Supervisor Name: \_\_\_\_\_

Supervisor Email Address: \_\_\_\_\_

Supervisor Phone Number: \_\_\_\_\_