



Summer Internship Petition

Career Development and Education
Center for Experiential and Integrative Learning
Golisano Hall, First Floor
Hartwick College
Oneonta, NY 13820
607-431-4425

Name: _____ ID: _____
Date: _____ Campus Box: _____ Phone: _____

I am petitioning for a late registration during the summer of 20_____

The department from which I wish to receive credit is: _____

My advisor for the internship is: _____

The number of credits I wish to receive: _____

Brief explanation why I am petitioning for a late registration for the internship:

Student signature: _____ date: _____

Internship Advisor signature: _____ date: _____

The internship advisor's signature indicates approval of this petition for late registration.

Internship Coordinator signature: _____ date: _____

The internship coordinator's signature indicates review and approval of the Learning Agreement and approval of this petition for late registration.

Your petition must be approved by your faculty supervisor for the internship and the internship coordinator. You must submit a **completed** Learning Agreement with this form for your petition to be considered.