

**University of Houston – Graduate College of Social Work
Ph.D. Program**

RESEARCH INTERNSHIP ENROLLMENT REQUEST FORM

Student Name: _____

PeopleSoft ID #: _____ Email Address: _____

Faculty Member Overseeing Course: _____

I would like to enroll in:

_____ Research Internship I: SOCW 8336 (3 SCHs)

_____ Research Internship II: SOCW 8116 (1 SCHs)

_____ Research Internship III: SOCW 8200 (2 SCH)

_____ Research Internship IV: SOCW 8304 (3 SCHs)

Year/Semester Course to Be Taken: _____

NOTE: If requesting a summer course, discuss with the instructor the summer session for enrollment to complete the internship (Summer I, II, III, or IV). Please indicate the summer session # and the year. Refer to the university calendar/summer course schedule for session dates. This information must be noted in order to process this request.

LEARNING OBJECTIVES FOR COURSE: By the end of the semester, the student will:

- 1.
- 2.
- 3.

EVALUATION CRITERIA: List specific products upon which grade will be based (examinations, papers, etc.):

- 1.
- 2.
- 3.

STUDENT SIGNATURE

DATE

FACULTY SIGNATURE

DATE

APPROVAL:

PH.D. PROGRAM DIRECTOR SIGNATURE

DATE

ASSIGNED COURSE AND SECTION NUMBER:

Approved to enroll in the following course:

SOCW _____ Section # _____

ADMINISTRATOR (PRINT)

DATE