

Administrative Internship Application

Administrative Internship Program
Abraham S. Fischler College of Education
Department of Curriculum & Instruction
Mailing Address: 3301 College Ave., Fort Lauderdale, FL 33314
Department: 954-262-8519 Fax: 954-262-3826

Instructions: Apply for the Internship a minimum of four (4) weeks before the start of the semester. Complete the Administrative Internship Application and Student Transaction Form. Send them to the Administrative Internship Program office using this cover sheet. **Submit application to:** Fax: (954) 262-3961, or scan and send by email: edlintern@nova.edu

From: _____ **Date:** _____

Return Fax Number: _____

Name (Ms./Mr.) _____ NSU ID# _____

Address _____
Street City State Zip

Primary Phone _____ Secondary Phone _____

NSU e-mail Address _____ Secondary e-mail _____

Current Position _____ Internship Site _____

Internship Site Address _____
Street City State Zip

Clinical Faculty Member's (local sponsor) Name: _____

Total Pages _____

Administrative Internship Application

NSU Site _____ Date Submitted _____

Name (Ms./Mr.) _____ NSU ID# _____

1. Select Degree Program:

Master of Science Educational Specialist Modified Core

2. Select Specialization:

MS / EdS State Approved Program in Educational Leadership (**EL 699**)
 MS Management and Administration of Educational Programs (**EL 698**)

3. Select Start Term:

EL 699 (6 credits)

Fall I Winter I Summer I

EL 698 (3 credits)

Fall I Fall II Winter I Winter II Summer I Summer II

4. Student Transaction Form

Complete the STF on the next page and submit with the Administrative Internship Application. DO NOT include the course reference number (CRN) on the STF.

----- FOR STAFF USE ONLY -----

Approved CRN _____ STF sent to Registration _____

DENIED Student contacted _____



NOVA SOUTHEASTERN UNIVERSITY
 Enrollment and Student Services
 Office of the University Registrar
 3301 College Avenue • Fort Lauderdale, Florida 33314-7
 (954) 262-7200 • 800-541-6682 • Fax (954) 262-3256

Student Transaction Form

(one semester per form only) **Abraham Fischler College of Education-Registration**
 Email: fseadvise@nova.edu or Fax: 954-262-2336



Last Name _____ First Name _____ Middle Initial _____

NSU ID _____ Phone Number _____ Semester _____

This form is ONLY to be used for registration or withdrawal requests that cannot be completed in real time through SharkLink or WebSTAR, for instance, after the drop/add period has passed. **Please note that beginning with the Spring 2014 term, all students registering for classes MUST complete a new Student Enrollment Agreement (SEA) each semester.** Although registrations submitted will generally be processed within three business days, they are not fully secured until the SEA for the appropriate term/semester has been completed online. To complete the SEA, follow the steps below within three days of submitting this Student Transaction Form:

Login to **SharkLink** ▶ on the student tab locate **Records & Academics** ▶ click on **Course Information** ▶ select **Registration-Add/Drop** ▶ select the term

Allow three business days for your request to display on your student record. However, requests processed will be cancelled if you fail to complete the SEA.

Courses to Add

Course Ref. No.	Subject	Couse No.	Section	Course Title	Start Date/End Date	Cr. Hrs.

Courses to Drop or Withdraw

Course Ref. No.	Subject	Couse No.	Section	Course Title	Start Date/End Date	Cr. Hrs.	Last Date of Attendance Office Use Only

 Student Signature

 Date

 Academic Advisor Signature

 Print Name

 Extension

 Date

Office Use Only	
_____ Processed by	_____ Date