

Morehead State University

Application for PHED 453 Exercise Science **Practicum/Internship**

A: Corporate B: Clinical C: Kinesiotherapy

(Please print or type. Attach a copy of your transcript or recent checksheet.)

Semester _____

Student Name: _____ ID _____

School Address: _____

Phone: _____

Home Address: _____

Phone: _____

Class Standing (Circle): Jr. Sr. G Credit Hours Completed: ____

Academic Advisor: _____ MSU Hours: _____

Other Colleges Attended: _____ Degrees Earned: ____

Overall GPA: _____ MSU GPA: _____ Ex.Sci. GPA: _____

Please circle the courses you have taken (453A: PHED 432, 450) (453B: 432, 441) (453C: 306, 424, 432).

Initial: _____

I have obtained internship insurance.

Initial: _____

I would like to do my internship with:

Name of Organization/Agency: _____

Location: _____

Supervisor: _____

Contact Information (phone): _____

I have made appropriate arrangements and have approval from the agency and individual listed.

(Signature of Applicant)

Approved by:

MSU Practicum Supervisor: _____

Exercise Science Coordinator

Or Department Chair: _____