

Application for Academic Credit - ACCT 4510-801 - Accounting Internship

Course Requirements: If any of the below are not met, permission to enroll in ACCT 4510-801 will be denied.

- Complete ACCT 3030 with a grade of C (2.0) or better
- Overall GPA at least 2.5
- Upper-division accounting GPA at least 2.5
- Internship accepted/secured
 - o Position must require significant accounting work and work with or for a professional accountant
- Must be able to clock at least 50 work hours by the end of the semester for each credit hour earned (up to 3 hours)
- Must be declared accounting major

Name: _____ **E-mail:** _____

Student ID number: _____ **Phone:** _____

Declared accounting major? _____ **Expected graduation date:** _____

Accounting courses completed or enrolled, and grade received:

Intro I	2010		Adv Fin	4010	
Intro II	2020		Analytics	4020	
Tax	3020		Adv Tax	4040	
Inter Financial I	3030		Principles - Internal Audit	4050	
Inter Financial II	3040		Adv Managerial	4060	
Inter Managerial	3050		Government/Nonprofit	4070	
AIS	3080		Principles - Auditng	4080	
			Adv Auditing	4090	

Cumulative GPA:

All UNO courses: _____

All UNO upper-division accounting courses: _____

When would you like to register for internship credit?

Circle one: **SPRING**

SUMMER

FALL

Year: _____

How many credit hours would you be eligible for?

Estimate the number of hours clocked by the end of the semester in which you are applying for credit.

1 credit hour = at least 50 work hours _____

2 credit hours = at least 100 work hours _____

3 credit hours = at least 150 work hours _____

TURN OVER

Position for which academic credit is sought:

Name of company: _____

Title of current position: _____

Length of time: With company _____ In this position _____

Immediate Supervisor (not recruiter):

Name: _____ Title: _____

Phone Number: _____ E-mail Address: _____

Please attach a job description as a separate file (pdf or Word). The job description should be from the source you found the posting (Handshake, etc.). This should be on the company's letterhead and authored by the company. Your application will not be considered unless a job description is included as explained above.

I certify that the above statements are true. In addition, you have my consent to discuss my performance with representatives of the above-named company.

Signed: _____ Date: _____

Please Note: ACCT 4510 applications are processed at the start of the semester you are taking the course. Please expect a few weeks after you turn in your application before receiving a permission number. Your application will be processed with adequate time to enroll in ACCT 4510 for the semester you are requesting. If you have any questions, please contact Mrs. Simonsen at lsimonsen@unomaha.edu.