

Morehead State University

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

A: Corporate

B: Cardiopulmonary

C: Musculoskeletal

Semester _____

Student Name: _____ ID _____

School Address: _____

Phone: _____

Home Address: _____

Class Standing: Jr. Sr. Credit Hours Completed: _____

Academic Advisor: _____

Overall GPA: _____

Please check the courses you have taken (PHED 326 ,332 ,424
432 , 441 , 450 Initial:_____

Name of Internship
Organization/Agency:_____

Location:_____

Supervisor:_____

Contact Information (phone):_____

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

Name of Applicant

Approved by:

MSU Practicum Supervisor:_____

Exercise Science Coordinator
Or Department Chair: _____