Vancouver Island University, Faculty of Management, Business

EXPRESSION OF INTEREST
Mgmt 499 – Internship or Mgmt 491 – Senior Project

This form is to be **submitted to the BBA Advisor by March 15** for verification of the required academic standing. Upon verification, this application will be reviewed by the Screening Committee and applicants will be notified no later than March 31.

Student Name _____

Student Number _____

Email _____

BBA Concentration _____

Course Selected Mgmt 499 _____ Mgmt 491 _____

Registration Semester Summer ____ Fall ____ Spring ____

Faculty Advisor _____

Internship Focus or
Project Topic _____

Signed _____ Date _____

Faculty Approval

Faculty Advisor _____ Date _____

BBA Advisor _____ Date _____
(Confirmation of required academic standing, including GPA)

Screening Committee:

Approved ____ **Conditional Approval ____** **Not Approved ____**