



## PETITION FOR APPROVAL OF INTERNSHIP HOURS

Submit this form to your Career & Community Resource Coordinator, Shannon Preston to count toward the 120 hours required for graduation. **This form must be filled out by the STUDENT, not the mentor.** Questions? Email Ms. Preston at [preston@columbus.k12.oh.us](mailto:preston@columbus.k12.oh.us)

\_\_\_\_\_  
Student's Name

\_\_\_\_\_  
Student ID Number

\_\_\_\_\_  
School

\_\_\_\_\_  
Grade

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In order to receive internship hours, you must complete the information below regarding your internship or community service experience. **Submit this form to your Career & Community Resource Coordinator, Shannon Preston, in the main office.**

Type of Experience (circle one):

Circle One: CCE: Career & College Exploration

CS:Community Service

EI: Employment/Internship

\_\_\_\_\_  
Name of Company/Organization

\_\_\_\_\_  
Print Mentor's Name

\_\_\_\_\_  
Address, City & State

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Student Name (Signature)

\_\_\_\_\_  
Boss/Mentor's Signature

\_\_\_\_\_  
Beginning Date of Internship

\_\_\_\_\_  
Ending Date of Internship

Total Number of Hours Served \_\_\_\_\_

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Mentor's Signature

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*The Career & Community Resource Coordinator will complete this section:*

Date \_\_\_\_\_

Approved \_\_\_\_\_

Disapproved \_\_\_\_\_

\_\_\_\_\_  
Total hours awarded

\_\_\_\_\_  
Career & Community Resource Coordinator's Signature

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