

Request for Internship Approval

**Richmond Campus** 3401 Brook Rd. Richmond VA 23227

[dtripodi@upsem.edu](mailto:dtripodi@upsem.edu) 804.278.4220

**Charlotte Campus** 5141 Sharon Road Charlotte NC 28210

[schang@upsem.edu](mailto:schang@upsem.edu) 980.636.1681

Last Name:           First Name:      

Indicate your "campus."

Richmond  Charlotte  BLP  CPE

**No Course Overlap Policy**

*Students planning to enroll in supervised ministry (parish, non-parish or CPE) must be aware of the faculty policy which states that no student may be enrolled in a course that meets at the same time as any other course. For the purposes of supervised ministry this means that internship activities may not conflict with other courses in which students are enrolled. Exceptions to this faculty policy require prior approval by the appropriate faculty committee. Please send any requests for exception to this policy to the instructor in time for forwarding to the committee via the dean for review and decision. Please state in the request any and all times of overlap, and all courses involved in the overlap.*

Campus Email Address: (Note: SMVPO will use this email for all communications):   

What degree program are you enrolled in?

What course are you taking?

Internship Setting Name:     

Internship Setting Denomination (if applicable):    

Setting Location (City, State):    

Supervisor’s Name:            Supervisor’s Email Address:      

Supervisor’s Phone Number:    

Internship Start Date:            Internship End Date (the day you pack your bags & leave!):      

**Choose from the following options:**

Academic Year Parish/Non-Parish Internship  Fall 3 credit hours  Spring 3 credit hours

Summer Intensive Parish/Non-Parish Internship  Richmond 6 credit hours

Spring II Intensive Parish/Non-Parish Internship  Charlotte 6 credit-hours

Student-Year-In-Ministry  6 credit hours

Church in the World 3 credit hours  Community Engagement  Evangelism  Interfaith

CPE  6 credit hours

**For those under care of a denominational committee of oversight:**

1. What denomination and committee oversee your candidacy process? (e.g., Presbyterian, Presbytery of the James, United Methodist, Virginia Conference, etc.)

Denomination:            Committee:      

1. What is the name & email address of your committee contact person?

Committee Contact:            Email Address:      