

Internship Request Form

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

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

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

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

Last Name:  Click or tap here to enter text.    First Name: Click or tap here to enter text.

**Indicate your "campus" and degree program**

Charlotte  Richmond BLP CPE

MACE M.Div.  Dual Degree

**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):   Click or tap here to enter text.

**Course Selection**

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

Richmond Summer Parish/Non-Parish Internship  6 credit hours

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

Student-In-Ministry Year  12 credit hours

Church in the World 3 credit hours  Community Engagement  Evangelism  Interfaith

CPE  3 credit hours  6 credit hours

**Internship Information**

Internship Site: Click or tap here to enter text.

Internship Setting Denomination (if applicable):    Click or tap here to enter text.

Setting Location (Address, City, State):    Click or tap here to enter text.

Supervisor’s Name: Click or tap here to enter text. Supervisor’s Email Address: Email@

Supervisor’s Phone Number:    Click or tap here to enter text.

Internship Start Date:   Click or tap here to enter text.

Internship End Date (the day you pack your bags & leave!):      Click or tap here to enter text.

**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: Click or tap here to enter text.   Committee: Click or tap here to enter text.

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

Committee Contact:   Click or tap here to enter text. Email Address: Click or tap here to enter text.