Lincoln University

BA 391— GRADUATE INTERNSHIP IN INTERNATIONAL BUSINESS PROGRESS FORM



STUDENT'S NAME (Last, First, and Middle Name)	STUDENT I.D. NUMBER
	@lincolnucasf.edu
TELEPHONE	E-MAIL
CURRENT TERM (Fall/ Spring/ Summer) Year	PERIOD FOR INTERNSHIP
Team (Fail Spring Summer)	TEMOD FOR EVIEWIGHT
FACULTY ADVISOR	
Faculty Advisors should fill in and sign on the the report progress. Students should submit below. Failure to submit this form may result	it to the Records Office at the times stated
STAGE 1: Please fill in the below section A and submit to Spring Semester) or before the end of June October (for Fall Semester).	`
A. Progress on Report Preparation: ☐ Satisfa Advisor Signature/Print Name	· ·
STAGE 2: Please fill in the below sections B and C, and (for Spring Semester) or before the end of J end of November (for Fall Semester).	<u>-</u>
B. Percentage of the work completed	
C. Advisor Comment	
Advisor Signature/ Print Name	Date:
Received by the Records Office	
Stage 1: Signature / Print Name	Date:
Stage 2: Signature /Print Name:	

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