

### Work Authorization Form

Date: \_\_\_\_\_

To: \_\_\_\_\_  
From: Joseph Weintrop, Accounting Internship Coordinator  
Re: Internship Authorization

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Mr. /Ms. \_\_\_\_\_ is a student at Baruch College. The student attests that the student meets all the criteria below:

1. The student has completed at least 45 credits
2. The student is a Zicklin student and has declared Accounting as his/her major
3. The student has at least a 2.5 average

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

Coordinator Signature: \_\_\_\_\_