

Please mail or fax completed form to:

WDW College Recruiting Educational Partnerships 1515 Buena Vista Drive Suite 180 Lake Buena Vista, FL 32830 407.934.6878 (fax)

CREDIT CONTACT INFORMATION SURVEY

| CONTACT INFORMAT | TION: | | | | | | | |
|-----------------------------------------------------------------------------|-------------------------------------------------------------------------------|-------------------------|----------------------|------------------------|----------|----------|--------------|--------|
| Academic Institution: | | | | | | | | |
| Name/Title: | | | | | | | | |
| College/Department: | | | | | | | | |
| Address: | | | | | | | | |
| City: | State: Z | Zip Code: | | Fax Num | ber: | | | |
| Phone Number: | E | E-mail Address: | | | | | | |
| CREDIT ELIGIBILITY | OPTIONS: | | | | | | | |
| Are students on the Disney C | College Program still considered | full-time at your ins | stitution? | Ε |] Yes | | Νο | |
| If yes, describe how students | maintain their full-time status: | | | | | | | |
| | | | | | | | | |
| If no, what harriers exist that | prohibit students from maintainir | og full-time status? | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| What is the maximum number | er of credits a student can receive | e for a five (5) mon | th Disney College F | Program experience | ? | | | |
| What is the maximum number | er of credits a student can receive | e for a seven (7) m | onth Disney College | e Program experier | nce? | | | |
| | on accept the American Council E, please visit their website at <u>htt</u> | | | urse credit? | 🗌 Yes | | No | |
| Please note below how your | students are able to acquire cre | dit for their participa | ation in the Disney | College Program. | | | | |
| | | Is Credit A | warded? | Number of Credit Hours | | | | |
| Internship – Work exp | perience only | 🗌 Yes | 🗌 No | | | | | |
| Internship – Work exp | perience and academic course(s |) 🗌 Yes | 🗌 No | | | | | |
| Co-op – Work experie | ence only | 🗌 Yes | 🗌 No | | | | | |
| Co-op – Work and ac | ademic course(s) | 🗌 Yes | 🗌 No | | | | | |
| ADDITIONAL INFORM | IATION: | | | | | | | |
| Can students from other insti Disney College Program? | tutions receive credit from your i | nstitution for course | es taken while on th | ne | Yes | | No | |
| Is credit at your institution available | ailable campus-wide? | | | | Yes | | No | |
| Is the credit that you offer available to students only in your department? | | | | Yes | | No | | |
| | d share information regarding the ts at other academic institutions? | | | | Yes | | No | |
| Are you willing to allow us to Disney College Program web | post your information from this s site? | survey on the | | | Yes | | No | |
| Please provide any further CollegeProgram | options and/or requirements | that students may | / encounter to ob | tain credit or for | their pa | rticipat | ion on the l | Disney |

For the following courses available to students on the Disney College Program, please indicate how the credit is awarded at your institution. Please provide course number and credits where applicable.

| Disney Course Title Type of Credit Available | | Course Number | Credit Hours | |
|------------------------------------------------------------|---------------------------|-----------------------------------------------------------|--------------|--|
| | | | | |
| Communications | ☐Internship ☐ Elective | □Independent Study □Co-op □ Course for Course Transfer | | |
| Experiential Learning | □Internship □ Elective | ☐Independent Study ☐Co-op ☐ Course for Course Transfer | | |
| Hospitality Management | □Internship □ Elective | ☐Independent Study ☐Co-op ☐ Course for Course Transfer | | |
| Human Resource Management | □Internship □ Elective | ☐Independent Study ☐Co-op ☐ Course for Course Transfer | | |
| Marketing U: Personal and Career Development Strategies | □Internship □ Elective | □Independent Study □Co-op □ Course for Course Transfer | | |
| Organizational Leadership | ☐Internship ☐ Elective | ☐Independent Study ☐Co-op ☐ Course for Course Transfer | | |
| Practicum | ☐Internship ☐ Elective | ☐Independent Study ☐Co-op ☐ Course for Course Transfer | | |
| Professional Development Studies Engineering | □Internship □ Elective | Independent Study Co-op | | |
| Professional Development Studies Criminal Justice | □Internship □ Elective | ☐Independent Study ☐Co-op | | |

AWARDING CREDIT:

Please list the person, at your institution, that students should contact regarding awarding credit for the Disney College Program.

| Name/Title: | | | | |
|-------------------|----|------|------|--|
| College/Departmer | t: | | | |
| Phone: | | | | |
| E-Mail: | | | | |

Dean of College and/ or Department Chair (Where credit is issued)

| Name/Title: | Name/Title: | |
|---------------------|---------------------|--|
| College/Department: | College/Department: | |
| Phone: | Phone: | |
| E-mail: | E-mail: | |

| Name/ Inte: | | | | |
|---------------------|--|--|--|--|
| College/Department: | | | | |
| | | | | |
| Phone: | | | | |
| | | | | |

Reg

Additional Faculty Member: Please provide information regarding additional faculty members on your campus who offer college credit for our program.

| Name/Title: | Name/Title: |
|---------------------|---------------------|
| College/Department: | College/Department: |
| Phone: | Phone: |
| E-mail: | E-mail: |
| | |

If you need any assistance, please contact us at 407-828-3238.

E-mail: