

Application for Internship 14:125:495 (3 cr.)

DEPARTMENT OF BIOMEDICAL ENGINEERING

*This form **MUST** be completed **BEFORE** registering and starting Internship. UPD needs to approve the internship prior to its start to ensure that it meets the requirements of a technical elective. Then given to Undergraduate Administrator, who will assign a special permission number. *

I. PERSONAL INFORMATION **REGISTERING for: ___ Summer (OR) ___ Fall/Spring**

Student's Name _____
(Last) (First)

Phone: _____ Class of: _____

Email: _____ RUID# _____

First Day of Work: _____ Last Day of Work: _____

II. EMPLOYER INFORMATION

Employing Institution: _____

Supervisor/Contact Name(s):

1. _____ 2. _____

Phone/Fax: _____ Phone/Fax: _____

Email: _____ Email: _____

Job Description: _____

Regulations:

1. Internship credits counts as a **Technical Electives ONLY**. **No Exceptions!**
2. Graded on a **Pass/No Credit** scale.
3. Final report (1-2 pages) **MUST** be submitted to *UG Director* at end of Internship summarizing work.
 - Report should include what the job duties were, what skills were learned, and anything else about the industry experience that you wish to share, bad or good.
4. Supervisor(s) **MUST** submit evaluation to *UG Director* at the end of the Internship.
 - This can simply be an email but **MUST** be sent **DIRECTLY** to the Undergraduate Director from the supervisor! Evaluation should confirm employment, list the duties performed, and contributions made to the project. If appropriate, supervisor can also include information about your performance. If an internal evaluation is performed and supervisor is comfortable/allowed to share that, that will also suffice.
5. Register during open registration period.
6. **Limit is TWO** Internship 3cr. Courses will count towards degree.

III. Signatures:

I have read the above regulations *and* understand the rules for my internship assignment

Student's Signature: _____ Date: _____

UG Director Signature: _____ Date: _____

Index Number: _____ Special Permission Number: _____