APPLICATION FOR ENROLLMENT IN CIS4399

Student name and ID:

Semester of internship:

Company offering internship:

Duration of internship and work-hours per week:

Hourly remuneration:

Brief description of internship (if the company already has a formal description of the internship program, please attach it to this application):

New software and other tools expected to be acquired during the internship:

Student signature: Direct supervisor full name,

Email and Telephone number and

Signature:

CISQM Department Decision

Signed and dated by Chair and faculty coordinator.