

APPLICATION TO THE M.S. COMPUTER SCIENCE INTERNSHIP PROGRAM

Student Information			
Name			
Email	Rivier:	Home:	Work:
Mailing Address:			
Phone	Home:	Mobil:	Work:
Academic Program	Name:	Enrolled since:	Expected date of completion:
Number of credits completed in the major:		Current GPA:	
Recommendation Letters	Name:	Name:	
Employer Information			
Name of Sponsoring Institution:			
Mailing Address:			
Web Address:			
Work Supervisor Information			
Name:		Title:	
Phone:		Email:	
Job Information			
Position Title:			
Stipend:			
Time Period	From:	To:	
Number of Hours:			
Course Information			
Semester/Term:		Course ID & Name:	
Goals and Objectives:			
Final Report Portfolio Deadlines:			

Student Signature _____ **Date** _____

Course Instructor Signature _____ **Date** _____

Director of Computer Science Signature _____ **Date** _____