



SGS Externship/Internship Application

Internship: ☐

Externship: ☐

Student:

Student Email:

Major Sponsor:

Major Sponsor Email:

SGS Program: Select Program

Year in Program:

Externship/Internship Dates

Start Date:

to **End Date:**

Full Time: ☐

Part Time: ☐

Weekly schedule (if part-time externship, schedule should include time in lab and time at externship):

Do any of the student's Major or Minor Sponsors (i.e., thesis mentor and thesis committee members) or their family members have any financial interest (e.g., equity, licensed technology, research funding, etc.) in the externship/internship organization? **Yes** ☐ **No** ☐

Externship/Internship Organization:

Externship/Internship Organization Address:

Externship/Internship Organization Contact Person (name, email, phone):

Externship/internship purpose and training benefit:

Financial details (include any required modification to SGS stipend):

Other comments:

Student Signature:

Date:

Major Sponsor Signature:

Date:

Program Director Approval:

Date:

Dean Approval:

Date: