

Computer Science Department
STUDENT INTERNSHIP REGISTRATION FORM

Note: You must already have a job that qualifies. See "Field Work Guidelines" for more information.

SAC STATE ID # _____

Last Name _____ First Name _____

Address _____
 Street City State Zip

Phone (cell) _____ Email Address: _____

**** Please list the best phone and email to reach you (print clearly). ****

I have received an offer to work as a student intern at _____

in the position of _____

In this position, my responsibilities will be to _____

I will be working _____ hours/week for _____ weeks for a total of _____ hours.

I will register for _____ unit(s) of CSC 195 for _____ semester/yr

OR

_____ unit(s) of CSC 295 for _____ semester/yr.

(International Students Only): This work experience will be a valuable part of my education since I will be able to apply the knowledge I have gained in the classroom to the real world.

This opportunity is not available in my home country of _____.

Student signature _____ Date _____

Work Supervisor Information/Verification:

Name _____ Phone _____

Title _____ Company _____

Address _____

"I certify that the student's work description is correct, and I agree to evaluate the student at the end of the work period."

Work Supervisor's Signature: _____

.....
CSC Dept. Chair/Grad Coordinator signature: _____ Date _____

Office Use: Registered _____ units for _____ (sem/yr) by _____ (initials) _____ (date)

For international students, photocopy this for him/her to take to Global Education.