

RESEARCH INTERNSHIP APPROVAL FORM

This form is to be complete Research Internship Policy			ng approval of a rese	arch internship. Refer to t	he
UR ID Number	Student Last Na	Student Last Name		Student First Name	
Department/Program		□ Adv. Cert. □ Master's □ PhD Degree Program			
 internship course (494) which the student is enhours of internship active Up to two (2) credits of For PhD students, the cany time prior to the dis The dates of the internship 	o must be an integrator internship credit for master's student olled in a research vities during the servities during the servities and internship dean's tuition waive sertation defense. Ship must coincide waived at least two we	al part of the stu t for each seme ts; 594 for PhD internship. The mester in which may be include r will cover up t with the gradua eeks prior to the	ident's program of stu ster in which the interi students) carries one student is expected to they register for interi ed on the student's Pro to two (2) credits of res te academic calendar.	nship falls. The research credit per semester in o complete at least 45 nship credit. ogram of Study form. search internship taken at to allow time for approva	
Internship Information					
\square Fall \square Spring \square Sum Semester(s)	nmer Year		Start Date	End Date	
□ Full-time □ Part-time Internship Status					
Internship Site and Address	S:				
Internship Supervisor:					
Internship Description:					
Basis for Assignment of Fir	al Grade:				

Total number of credits student has already re	ceived for prior	esearch internships*:			
	ill cover up to two	uded on the student's Program of Study form. (2) credits of research internship taken at any dits may be taken, but the cost of tuition must be			
Notice to Research Supervisor/Advisor: Your signature indicates your willingness to su and your endorsement of its importance to the the student is being funded externally in a full- student's dissertation.	e student's progra	am of study. Additionally, you acknowledge that if			
Research Supervisor/Advisor Signature	Date	_			
Notice to Director of Graduate Studies/Cha Your signature confirms approval of the propo program and consistency with departmental p	sed work, both in	n terms of quality and relevance to the student's			
DGS/Chair Signature	Date	_			
Submission: This form should be submitted to your <u>graduate program coordinator</u> who will forward this form onto the GEPA Office for review and processing. A registration form for 494/594 Research Internship should also be submitted in conjunction with this form. You and your program coordinator will receive email confirmation when the forms have been approved. Questions? Please contact the GEPA Office at <u>ASEGEPA@rochester.edu</u> .					
GEPA Office Approval		Date			
 □ First internship credit, include on POS □ Second internship credit, include on POS □ Third or more internship credit, do not include on POS 		Earned units Year in program			