

GRADUATE COMPUTER SCIENCE PROGRAM INTERNSHIP APPROVAL FORM

Internship credits are graded Pass/No Pass, and do not count towards the requirements of any Computer Science Degree or Certificate. Submit this form with a copy of your internship offer letter, a copy of your current DARS or transcripts, and your approved Plan of Study to the CS Graduate Advisor (gccs@pdx.edu).

STUDENT INFORMATION									
Name:		P:	SU ID#						
Email:	Phone:		Т	erm:					
INTERNSHIP INFORMATION									
Organization Name:									
Address of Work Site:									
Supervisor Name:									
Supervisor Email:		_ Supervisor Pho	ne:						
Description of the Internship:									
Expected Duration for this academic	e term:		to _						
Average Hours per week:	_	Credit Hours: _		_					
	IMPORTANT	INFORMATIO	N						
At the end of each quarter of the intern form. This status report form is to be st day of final's week of the quarter. Failingrade.	ubmitted to the C	omputer Science I	nternship	Direc	tor r	10 lat	er tha	n th	e last
Student Signature:		Supervisor Sign	ature:						