Internship Proposal and Supervisor Request Form\*

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| --- | --- |
| Name: | ID: |
| CGPA: | Credits Completed: |
| Minor: | |
| Minor: | |
| List Relevant Optional Course: | |
| Proposed Title/Work: | |
| Proposed Supervisor:  Internal | |
| Proposed Supervisor:  External | |
| Student Signature: Date: | |
|  | |
| Supervisor Signature:  Internal | Date: |
|  | |
| Supervisor Signature:  External | Date: |
|  | Date: |
| Head of CSE Signature: |

Remark:

\* Complete this form and submit this at the CSE department office (Room# 5001).