

STUDENT SECTION (to be filled out online)

Name _____ UIN _____ SEVIS ID# N_____
5 VIS U.S. Address _____
E-Mail: @ _____ Degree: B.A. B.S. M.A. M.S. Ph.D. Major _____

INTERNSHIP INFORMATION

Required Training Dates (MM/DD/YYYY) _____ - _____
This is full-time (+20 hrs/week - ~~less~~) part-time (1-20 hrs/week - ~~less~~)

What are the SPECIFIC goals of this particular internship? (NOTE: "To gain practical experience in the field (or the like)" is not an acceptable goal. Please indicate categories relevant to your work and learning.)

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