## IDS 3947 Internship Course Approval Form

Name: _____ U#: _____
Address: _____ Email: _____
_____ Phone: _____

Course: **IDS 3947**
Credit Hours: _____
Semester: _____

Describe your Internship: _____
_____
_____
_____
_____
_____
_____
_____
_____

**Note: Hours earned as Internship credit (maximum up to 3 hours) may only be used towards graduation, if approved by the Department UG Advisor.**
**Any hours of Internship course used as an outside the department technical elective must contain a reasonable amount of engineering work that is technical in content.**

The student, by signing this contract, agrees to carry out the internship described above under the guidance and requirements as specified in the Internship Contract Form to be filled out separately.

_____        _____
Student Signature                       Date

*Approved by Department Advisor*        ____ *Yes*   ____ *No*

_____        _____
Department UG Advisor Signature         Date