

COLLEGE OF ENGINEERING, COMPUTER STUDIES AND ARCHITECTURE  
**Checklist for Practicum / Internship Application Requirements**

Period of Enrollment	<input type="checkbox"/> Semester _____	<input type="checkbox"/> Special Term
<i>Please put a ✓ mark</i> AY 20____ - 20____		
Printed Name <small>(Lastname, Given Name)</small>		
Year / Level   and Course/Program		
Requirements <i>(to be Printed in OFFICIO/LEGAL size BOND PAPER only)</i> <b>* to be filled by College</b>		
<i>* Please put a ✓ mark</i>		
<input type="checkbox"/> Accomplished Internship Application Form (Digital Form)		
<input type="checkbox"/> Undertaking with Liability Waiver   < COMPLETELY SIGNED AND NOTARIZED >		
<input type="checkbox"/> Request to Credit Alternative Training Hours   < PROCESSED and APPROVED >		

IMPORTANT REMINDER: Only students who were able to meet the academic requirements will be allowed to enroll.

Submitted by:

Received by:

\_\_\_\_\_  
STUDENT  
*Signature over Printed Name / Date*

\_\_\_\_\_  
\* INTERNSHIP COORDINATOR  
*Signature over Printed Name / Date*

CEA-TPI-01.001 (Apr 29, 2024)

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