Computer Science and Engineering

4202 E. Fowler Ave., ENB 118

Tampa, FL 33620 Phone: 813.974-3652 Fax: 813-974-5462

REQUEST FOR GRADUATE INTERNSHIP CIS 6946 Internship/Practicums/Clinical Practice

Attach a copy of your letter of offer that states the general nature of your work and mentions any specific duties or responsibilities the company will assign to you. If your letter of offer does not contain your job duties, you will need to contact your supervisor and obtain an outline of the work to be performed during the internship period. International students must also bring the CPT authorization.

Students MUST receive approval from their faculty advisor before going on Internship!

Name Ramakrishna Reddy Vennam UID <u>U85778186</u>				
E-mail address vennamr@usf.edu				
Company name of your employer SuperINTRO				
Name and Phone Number of Supervisor Younes Essaadani and +1(415) 359-7646				
Employment address 528 Larkin St San Francisco, CA 94109				
Work period: From	JAN 27 th To	April 28 th	Term & year:	_ 2025
Salary \$	_Unpaid	Per <u>25hrs per</u>	week	
Course Registration and Approval				
Course Number				
CRN# Prefix	Course Section	Semester	Year	Number of Credit hours
Does the above named student have permission to take research hours under your supervision while interning?				
Circle One: Yes	No			·
		_		
Faculty Advisor				Date
Approved By: Graduate Pro	gram Director			Date