**Form I - 1**

**Internship Acceptance Form**

|  |  |
| --- | --- |
| *(To be filled by the Student)*  Student ID No |  |

|  |  |
| --- | --- |
| Student’s Name |  |
|  |  |
| Address |  |
|  |  |
| Home Phone |  |
|  |  |
| Mobile Phone |  |
|  |  |
| E-mail Addresses |  |

**\*Use comma (,) to separate multiple e-mail addresses**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Semester |  | Year |  | CGPA |  |

*(To be filled by the Employer)*

|  |  |
| --- | --- |
| Employer’s Name |  |
|  |  |
| Employer’s Address |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Supervisor’s Name |  | Supervisor’s Phone |  |
|  |  |  |  |
| Supervisor’s Title |  | Supervisor’s E-mail |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Internship Start Date | Click here to enter a date. | Internship End Date | Click here to enter a date. |

***(Recommended period is no less than 6 months)***

|  |  |
| --- | --- |
| No of Hours / Week |  |

**Please list the tasks the students is expected to complete**

**List what the student will learn during the internship period**

|  |  |  |  |
| --- | --- | --- | --- |
| External Supervisor’s Name |  | Date | Click here to enter a date. |