

ENGINEERING INTERNSHIP REGISTRATION FORM

Students wishing to register for an Engineering internship must complete appropriate approvals and submit this form to the Registrar's Office prior to the start of the internship.

Student Information

Student ID#: _____

Name: _____
First Middle Last

Email Address: _____@sunymaritime.edu Phone: _____

Internship Information

Semester and Year the internship is taking place:

**Appropriate registration term will be determined by the Registrar's Office.*

Semester: ☐ Summer ☐ Fall ☐ Spring Year: _____

Approximate Start and End Dates: _____ to _____

Internship Course Number: ☐ ENGR 526 Industrial Internship I (3cr.)
☐ ENGR 536 Industrial Internship II (3cr.)
☐ ENGR 538 Extended Industrial Internship (6cr.)

Name of Company/Organization: _____

Internship Mentor: _____ / _____
Name Professional Title/Position

Internship Registration Approval

Faculty Supervisor Name (please print): _____

Faculty Supervisor Signature: _____ Date: _____

Department Chairperson Signature: _____ Date: _____

Student Authorization

By signing below, you authorize registration into the above internship course and accept responsibility for all related charges billed to your student account.

Student Signature: _____ Date: _____