Bachelor Thesis Information Form

IP PARIS

ÉCOLE POLYTECHNIQUE
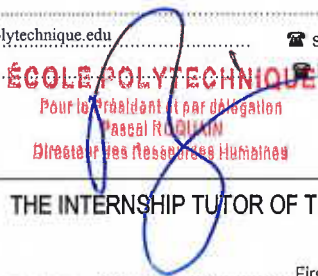
In order to have your internship agreement issued, you must send this form to berengere.loustaud@polytechnique.edu with the following documents :

- the HR approval of the information below (an email of confirmation),
- a liability insurance certificate,
- health coverage insurance certificate for all internships abroad (Europe : copy of the EU social security card. Beyond EU : include a medical and repatriation insurance certificate).

From: 03-FEB-20   To: 27-MAR-20   Interruption period: ■ no   ☐ yes: ....

Internship title: An approximation algorithm for the MAXCUT problem

Activities assigned: Implementation of approximation algorithm for MAXCUT, and their study

Stipend (excluding benefits offered): ☐ minimum in France (3.75€/h)   or   ■ other: ....

THE INTERN

Last name: Chan   First name: Chun Hei Michael

@ : chun-hei-michael.chan@polytechnique.edu   ☎ :

Social security affiliation organization: LMDE

THE HOST ORGANIZATION

Name: Ecole Polytechnique - CMAP UMR 7641

Adress: Route de saclay 91128 Palaiseau Cedex   State/Country: FRANCE

Department to wich the intern is assigned and adress: CMAP UMR 7641

Adress if there is another place: ....

@ signatory of the agreement: pascal.roquain@polytechnique.edu   ☎ signatory of the agreement: ....

@ HR contact: pascal.roquain@polytechnique.edu   ☎ HR contact: ....

ÉCOLE POLYTECHNIQUE
Pour le Président et par délégation
Pascal ROQUIN
Directeur des Ressources Humaines

THE INTERNSHIP TUTOR OF THE HOST ORGANIZATION

Last name: Boyet   First name: Marin

Role: ....

@ : marin.boyet@polytechnique.edu   ☎ :

THE REFERENT INSTRUCTOR

Last name: Conforti   First name Giovanni

@ : giovanni.conforti@polytechnique.edu   ☎ :