STUDENT INFORMATION

First Name: ___________________  Last Name: ___________________

Home University: ___________________

Current Visa Held/Requested*: ___________________

*Students will need to get F-1 Visa status for this program and must complete the I-20 Request form on the SCE web site. They must also complete the SCE Registration form.

Current Year in School: (Circle one)  Sophomore  Junior  Senior  Graduate Student

(Student’s year in school prior to the internship. Please describe if the academic years of the student’s home institution are not consistent with the U.S. educational system.)

Start Date of Internship: ______/____/____  End Date of Internship: ______/____/____

Student’s CESS Registration Status: (Circle one)  Undergraduate  Graduate

Independent Study Course Number: ____________  Number of Credits: __________

FACULTY/RESEARCH INFORMATION

Faculty Supervisor’s Name/Title:
________________________________________________________

Lab/Office in Which Student Will Work:
________________________________________________________

Describe Research Work and the Nature of the Supervision: __________________

________________________________________________________

________________________________________________________

________________________________________________________

________________________________________________________
**DEPARTMENT/SCHOOL INFORMATION**

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<tr>
<th>Department/School Name:</th>
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<tr>
<th>Contact Person:</th>
<th>Phone #:</th>
<th>Email:</th>
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<th>Source of Funds to Pay Administrative Fee:</th>
<th>Account Number</th>
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**DEPARTMENT/SCHOOL/COLLEGE APPROVALS**

Signatures acknowledge that the student has been appointed as a Research Intern and meets the eligibility criteria to participate in the Provost’s International Research Internship Program.

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<tr>
<th>Faculty Supervisor’s Approval:</th>
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<th>Director’s/Chair’s Approval:</th>
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<th>Dean’s or Designee Approval:</th>
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Please submit this form via email (with electronic signatures) or hard copy to:

Eric Lavin  
School of Continuing Education and Summer Sessions  
B20 Day Hall  
Phone: 607.255.4987  
Fax: 607.255.9697  
Email: el527@cornell.edu