

**Pharmaceutical Sciences
INTERNSHIP PROGRAM
APPLICATION FORM**

Interested students must obtain approval from thesis supervisor prior to proceeding with the application process.

Please complete and submit your application along with an updated CV to the Graduate Office before the application deadline. All applications will be reviewed by the Graduate Department to ensure students meet the requirements for specific internship opportunities and then forwarded to potential sponsor companies/agencies. The final selection of the candidate for internship will be decided by the sponsor company/agency. Once a student is selected, s/he will be absent from the thesis supervisor's research team and therefore, the supervisor will not be responsible for the student's stipend as it will be covered by the internship sponsor. At the end of the program, the student is expected to submit a summary report to the supervisor, and members of the thesis advisory committee.

The report will ensure the absence of proprietary information.

PERSONAL INFORMATION:

Date: _____

Student Name: _____

Supervisor Name: _____

Student Number: _____

Co-Supervisor Name: _____

Position(s) Applying For:

Start Date: _____

End Date: _____

ACADEMIC INFORMATION:

1. Please provide a summary (no longer than 250 words) of your current research:

2. Attach a full CV

3. If applicable, attach any required position specific materials (as noted in specific position descriptions.

Student Signature

Date