COMPSCI 493 – Internship in Computer Science – UW-Whitewater Request to Enroll

Student's Name						UW-W ID #				
UW-W Email						Phone				
Term: Winterim									3	
Internship Employ										
Location										
Work Supervisor (if known)					Email					
Start Date End Date					Avg. Hours per Week					
attach a copy of you	ur job des	eription.								
I have been offered hours per week dur for earning a Satist	ring the i	nternship. 1	I unde	rstand an						
Student's Signatur	e					Date				
Please give this stu meets the departm expected to provide	ent's requ	uirements t	o enro	ll in COM	IPSCI 49	3, and this				
UW-Whitewater In	iternship	Supervisor	's Nan	ne						
Signature						Date				