

SCHOOL OF ENGINEERING
APPLICATION FOR SUMMER INTERNSHIP CREDIT & SCHOLARSHIP

Date of Request: [Click here to enter text.](#)

Subject Area / Course Number: ES 3884-01 or other approved course* [Click here to enter text.](#)

Number of previous VU summer internship scholarships: Choose an item.

VUSE Student Information

First Name, Middle Name: [Click here to enter text.](#)

Last Name: [Click here to enter text.](#)

Phone #: [Click here to enter text.](#)

Email Address: [Click here to enter text.](#)

VUnet ID: [Click here to enter text.](#)

Expected Graduation Date (MM/YYYY): [Click here to enter text.](#)

VUSE Major(s): Choose an item.

Internship Information

Company Name: [Click here to enter text.](#)

Internship Title: [Click here to enter text.](#)

Internship start and end dates: [Click here to enter text.](#)

Address: [Click here to enter text.](#)

City and State: [Click here to enter text.](#)

Site Supervisor: Ms. Mr. Dr. **Name:** [Click here to enter text.](#)

Supervisor Title: [Click here to enter text.](#)

Supervisor's Phone: [Click here to enter text.](#)

Supervisor's Email: [Click here to enter text.](#)

Industry: (Check one)

Arts/Communications/Entertainment/Media

Engineering/IT

Education/Social Services/Community Orgs

Finance/Real Estate/Insurance

Health/Science

Public Service/Govt/Law

Consulting/Management/HR/Sales

Internship Description: [Click here to enter text.](#)

Expectations / deliverables for academic credit:

- Complete the online Summer Internship Subsidy Orientation & Quiz (Required). Attach quiz results to this form.
- Employer evaluation of internship performance midway and again at end of semester
- Internship report (see faculty supervisor for requirements)
- Other: [Click here to enter text.](#)

In consideration of this scholarship, I commit to representing myself and Vanderbilt in a professional manner, will pay the required \$200 and any other required fees, and have attached a copy of a letter (or email) from the internship provider stipulating the requirement for academic credit.

Student Signature: _____
Date

Faculty Supervisor Name*: [Click here to enter text.](#)

I agree to supervise the academic portion of this internship:

Faculty Signature and Date: _____
Date

Student meets eligibility requirements for the School of Engineering and is approved for this scholarship:

Associate Dean Christopher Rowe's Signature **Date**

***Please consult with Associate Dean Christopher Rowe regarding other approved courses/sections and potential faculty supervisors. Dean Rowe is the faculty supervisor for all ES 3884-01 enrollments.**