REQUEST TO ENROLL IN BE 596 GRADUATE INTERNSHIP

To receive credit for an internship in Biomedical Engineering you must turn in this completed form with signatures and supporting documents no later than 2 weeks before the add/drop deadline. This Request to Enroll form, the Statement of Responsibility on the next page, and internship description must be submitted through the online SEAS Force Registration website. Failure to complete these forms means you will not be enrolled in BE 596. It is your responsibility to secure your internship. Once approved by the Coordinating Instructor, the department will register you for BE 596 for the appropriate number of credit hours. You must be completing the internship itself during the same semester for which you are requesting to enroll in credits.

Name of Student:		Pers	son Number:
(Last)	(First)	(MI)	
Student Email:		Sem	nester and Year:
Number of credits you wish	to enroll in:		
Internship Project Informa Company Name:	ntion:		
Company Address:			
Jobsite Supervisor:		Supervisor Email or	Phone:
General nature of work to be	performed during internship	(check all that apply):	
Laboratory Research	Product Design/Developmen	nt Research Analysis	Other
ou will use to accomplish interns		ild be developed in consultation	nedical engineering skills or knowledge n with the jobsite supervisor. If a formal
45 hours of work completed (changed after the drop/add dead complete two progress reports,	e.g. 3 credits is 135 hours). The ralline, additional hours worked was preliminary report, one final passigned by the coordinating inst	number of credits must be requill not result in additional creditper, and submit an evaluation	lit hour of BE 596 will be awarded per ested on this form and cannot be ts awarded. In addition you must from your jobsite supervisor. At the end e completing the internship hours during
I agree to terms and condition	ns indicated by this form and	those listed in the syllabus:	
(Student signature)			(date)
(Supervisor signature)			(date)
(Faculty Advisor name)	(Faculty	Advisor signature)	(date)

Submit the following items to the: SEAS Force Registration website for final approval:

- BE 596 Request to Enroll form
- Statement of Responsibility
- Internship Description (as described above)

STATEMENT OF RESPONSIBILITY

To receive credit for an internship in Biomedical Engineering must turn this completed form in by the Friday of the first week of classes or the last day of drop/add, whichever is sooner. This form must be submitted alongside the Internship Proposal. Both forms should be submitted through the <u>SEAS Force Registration website</u>. Failure to complete these forms means you will not be enrolled in BE 596. It is your responsibility to secure your internship.

(Last) (First) (MI	Semester and Year:
•	
	recognize that I am a representative
I,not only of myself, but of the Department of Biomedical Eng	ineering and of the University at Ruffalo. It
is imperative that I act at all times with ethical and profession	
promise to uphold the Academic Integrity policy of the Unive	
conduct or confidentiality agreement for my employer. If it as	· · · · · · · · · · · · · · · · · · ·
conflict with the expectations of the Department and the Univ	
my supervisor and the coordinating instructor to resolve the is	
I understand that I am responsible for completing a m	
registered, as well as the Internship Proposal, two progress re	
paper. I understand it is my responsibility to have my supervi	
report and the final supervisor evaluation in a timely manner.	
supervisor and complete all assigned tasks to the fullest of my	y abilities.
(Student signature)	(date)