Preliminary Interest in EDGE Internship

Ph.D. Degree Candidate Name ____________________________

Thesis Mentor Name ____________________________

Year of Study ____________________________

US Citizen ☐ Yes ☐ No

If No, Visa status: ____________________________

Ph.D. Degree Candidate

1. I would be interested in internship opportunities in the following fields:
   ☐ Consulting
   ☐ Academia
   ☐ Government
   ☐ Industry
   ☐ Other: ____________________________

   Please clarify internship field here (i.e. R&D, Regulatory Affairs, Intellectual Property, etc.):
   ____________________________________________________________________________________

   Please clarify area of interest here (i.e. medical imaging, computational biology, etc.):
   ____________________________________________________________________________________

2. I am specifically interested in the following companies / organizations:
   ____________________________________________________________________________________

3. I would be interested in a
   ☐ Part-time internship
   ☐ Full-time internship for a duration of
     ☐ 3 months or
     ☐ Other ______________

4. Is there a particular time period that you ☐ prefer / ☐ require the internship to be?
   ____________________________________________________________________________________

5. Is there a particular location that you ☐ prefer / ☐ require the internship to be?
   ____________________________________________________________________________________
6. Have you completed an Individualized Development Plan with your PI? ☐ Yes  ☐ No

7. Have you discussed your career goals with your mentor? ☐ Yes  ☐ No

______________________________   _________________________
Signature of Ph.D. Candidate       Date

Thesis Mentor

1. I would recommend Ph.D. Degree Candidate ______________________ for an internship in the above fields and/or companies.
   ☐ Yes  ☐ No
   Comments _______________________

2. I would be willing to grant permission to this Ph.D. Degree Candidate to participate in an internship for the above described duration, under mutually agreed conditions (submission of manuscript, completion of oral exam, etc.). These conditions will be agreed upon at the time of accepting the internship position through the signing of a Memorandum of Understanding (MOU) with the graduate student.
   ☐ Yes  ☐ No
   Comments _______________________

3. I understand that I will not be expected to provide any financial support for the duration of a full time internship, and only partial support for the duration of a part time internship.

______________________________   _________________________
Signature of Thesis Mentor        Date