Department of Neuroscience

NROSCI 1900/1903
INTERNSHIP EXPERIENCE

Term:  □ Fall  □ Spring  of 2020

Student Name:

Email:  

Course  |  Grade Option
-------|-----------------  
□ NROSCI 1900  |  □ CREDIT(S)  □ S/NG  □ LG

Phone:  □

PeopleSoft#:  □

□ NROSCI 1903*  |  □ CREDIT(S)  □ Letter Grade

* NROSCI 1903 is an internship used to fulfill the capstone requirement.

Name of Site Supervisor:

Email:  

Phone:  

Faculty Mentor Name: (please print)

Instructions/Comments:


Required Signatures

I agree to be engaged in my internship experience, to adhere to the scheduled hours and to seek assistance from my mentor as needed.

Student Signature  Date:

I agree to mentor the above student by assigning a project and checking progress throughout the term.

Faculty Mentor Signature:  Date:

Department Authorization:

Authorization may be granted by any one of the following: Dr. Sesack (Sesack@pitt.edu)  
Dr. Johnson (jjohnson@pitt.edu)  Dr. Artim (dea20@pitt.edu)  Dr. Fanselow (Fanselow@pitt.edu)

Return completed form to link posted on Canvas News and Events page before the end of add/drop for processing.

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