Computer Science
UNIVERSITY OF TORONTO

Master of Science in Applied Computing (MScAC) – Internship Project Approval Form

Completion of an eight month applied-research internship is a formal requirement of the MScAC program, and this must take place in order for students to graduate. All internships must be approved by the Director, Professional Programs; submission and authorization of the details contained within this form ensures approval of your internship project.

INSTRUCTIONS

- Complete all applicable fields.
- This form should be completed and submitted by **April 30** to the Director, Professional Programs.
- Forms can be submitted in hard copy or via e-mail to mscac@cs.toronto.edu.
- If you are intending to complete two four month internships, you will need to fill out two copies of this form – one for each project.
- You will be required to provide complete details of the following:

  - Project Title & Description
  - Academic Supervisor(s) Details
  - Industry Supervisor(s) Details
  - Details of Financial support

APPLICATION MATERIALS

- Approval Form Cover Page (page 1)
- Internship Project Description (page 2)
- Participants & Funding (page 3)

SECTION 1: COVER PAGE

Last Name	First Name	Student ID

SECTION 2: INTERNSHIP PROJECT DESCRIPTION

Please provide a description of your proposed internship project.

Title of project	
Duration of project	4 months 8 months
Project start date	
Project Overview (250 – 300 words)	

SECTION 3: PARTICIPANTS

Your applied research internship requires you to identify both an industry and an academic supervisor(s). Please give details of these in the sections below.

Academic Supervisor(s)

	Academic Supervisor	Co-Supervisor (if applicable)
Name		
Department		
E-mail		
Phone		

Industry Supervisor(s)

	Industry Supervisor	Co-Supervisor (if applicable)
Name		
Company		
Position		
Department		
Phone		
E-mail		

SECTION 4: FINANCIAL SUPPORT

Please indicate below if you are intending to apply for any government funding/matched funds programs available for internships.

Funding Program	
MITACS	
OCE TalentEdge	
NSERC (please specify type)	
Other (please specify)	
I'm not intending to apply.	

SECTION 5: SIGNATURES (To be completed by the student & Director, Professional Programs)

Student Signature:	Date:

Internship Project Proposal Assessment	Approved Denied
Director, Professional Programs Signature:	Date: