

International Research Interns SPECIFICATION SHEET PRIOR TO INVITATION

POLYTECHNIQUE
MONTREAL



SECTION 1 (A to E) : TO BE COMPLETED BY THE INTERN

A. IDENTITY OF THE INVITED RESEARCH INTERN

Family Name (surname), as shown on the passport

First name(s), as shown on the passport

Country of Citizenship | _____

Home Country (if different) | _____

Country of birth | _____

Date of birth ___ / ___ / ___ **Sex:** M F
 year month day

Passport number | _____

Email | _____

Mailing Address | _____
 number and street name
| _____
 address complements (building, apartment, etc.)
| _____
 postal code and city
| _____
 country

Phone + _____
 country code nb.

B. HOME INSTITUTION

Full name (without abbreviations)

Abbreviated name | _____

Other known names of the institution
(if the name has changed or if the institution has merged with another one)
**and names of the organizations to which the institution is
Affiliated** (if it belongs to a consortium, a university, an institute, etc.)

Student ID number in the home institution

Current Study Program

Mailing Address | _____
 number and street name
| _____
 address complements (building, apartment, etc.)
| _____
 postal code and city
| _____
 country

C. CONTACTS IN THE HOME INSTITUTION

Academic Supervision of the Internship ensured by:

Name | _____

Title | _____

Email | _____

Phone + _____
 country code nb

Fax + _____
 country code nb

Administrative Follow-up of the Internship ensured by:

Name | _____

Title | _____

Email | _____

Phone + _____
 country code nb

Fax + _____
 country code nb

Institution Representative (authorized to sign conventions)

Name | _____

Title | _____

Email | _____

Phone + _____
 country code nb

Fax + _____
 country code nb

D. FUNDING SOURCES OUTSIDE POLYTECHNIQUE

Home institution scholarship

➔ amount : _____

Scholarship from a third party

➔ amount : _____

➔ organization/program

None (personal funding)

E. SIGNATURE OF THE INTERN

I hereby attest that the information provided is exact and actual.

Date:

Signature:

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SECTION 2 (F to H) : TO BE COMPLETED BY THE PROFESSOR SUPERVIZING THE INTERNSHIP

F. SUPERVISION OF THE INTERN

Family name of the professor

First name of the professor

Engineering Department:

- Chemical Civil/Geol./Mining Computer/Software
 Electrical Maths/Industrial Mechanical Physics

Research Project Subject

Main tasks during the internship

Required skills for the internship

University Cycle at Polytechnique:

- 1st (undergrad) 2nd 3rd (doctoral)

Duration of the activity:

from _____ to _____

Location of the research activities:

- Polytechnique Buildings (main, Lassonde, Bombardier, Aisenstadt)

others: _____
name and address

Schedule:

- 35 hours/week

_____ hours/week

- night/weekend hours to be scheduled: please precise:

G. FINANCIAL COMPENSATION

- No compensation

- Scholarship (financial support)

→ amount: _____ \$CAN/month

- Remuneration (salary)

→ amount: _____ \$CAN/month

- Refund of expenses (maximum expenses)

→ return journey: _____ \$CAN

→ living expenses: _____ \$CAN/month

H. SIGNATURE OF THE PROFESSOR

I hereby commit myself to supervise the student

Date:

Signature:

Reserved for Host Department at Polytechnique:

Type d'entente:

- Aucune
 Bilatérale
 CRÉPUQ

Type de dispense d'ÉIMT:

- C20 (Emploi réciproque)
 C21 (Expérience internationale Canada)
 C44 (Post-doc ou bourse de doctorat)
 Autres, indiquez: