

Internship Notification Form

D / M / Y

Dear Dean ○○;

【Student】

Major

Grade / Student number

Name

(Cellular number contacted during the internship : _____)

【Supervisor】

Name of occupation / Name

Seal

Classification	The internship is carried out <input type="checkbox"/> During regular curricular activities Name of subject · Number of credits (_____ · _____) <input type="checkbox"/> School events <input type="checkbox"/> Extracurricular activities
Internship Duration	D / M / Y ~ D / M / Y (Total ○○days) (Pre-training <input type="checkbox"/> yes <input type="checkbox"/> no Ex-post training <input type="checkbox"/> yes <input type="checkbox"/> no)
Host Organization	Company name : Department : Location : ※For Overseas Visa Type : <input type="checkbox"/> sightseeing <input type="checkbox"/> student <input type="checkbox"/> none <input type="checkbox"/> other (_____)
Training Contents (Theme)	
Allowances from Host Organization	<input type="checkbox"/> none <input type="checkbox"/> allowance <input type="checkbox"/> food expenses <input type="checkbox"/> transportation expenses <input type="checkbox"/> other (_____)
Covering Insurance	<input type="checkbox"/> Personal Accident Insurance for Students Pursuing Education and Research(PAS) (Date of Enrollment : D / M / Y) <input type="checkbox"/> Liability Insurance coupled with PAS (Date of Enrollment : D / M / Y) <input type="checkbox"/> UNIV.CO-OP. Life Mutual Insurance <input type="checkbox"/> UNIV.CO-OP. Personal Liability Insurance for Students <input type="checkbox"/> Other (_____)

※Office Use Only

Conclusion : yes · no

◆ Questionnaire : Application procedure ◆

To company Via navigation website Via university Via professor Other (_____)

1. The student who participates in an internship is required to enroll "Personal Accident Insurance for Students/Liability Insurance" and "Liability Insurance with Personal Accident Insurance for Students in Education and Research"

2. In the case where an internship notification has been accepted by the Dean, the internship shall only be accepted as coverage of Personal Accident Insurance for Students Pursuing Education and Research (PAS) and Liability Insurance coupled with PAS

3. The first-year undergraduate student must submit the internship notification sheet to the Student Support Division, Career Support Section. (Center Zone1, 2F / Help desk No.7)