

# Exploration internship

## RESEARCH PROJECT PROPOSAL

IDENTIFICATION OF THE INTERN			
Last name :		First name :	
Phone :		Email :	
Status :	Canadian Citizen <input type="checkbox"/>	Permanent Resident <input type="checkbox"/>	Temporary resident (Work/study permit) <input type="checkbox"/>
Level :	Collegial <input type="checkbox"/>	Baccalaureate <input type="checkbox"/>	Master <input type="checkbox"/>
Academic institution :			
Program :			
INTERNSHIP			
Principal Investigator :			
Internship supervisor :			
Description of the research project :			
Description of the trainee's tasks:			
Learning objectives for the intern:			
Start date : (dd/mm/yyyy)	_____ / _____ / _____	End date : (dd/mm/yyyy)	_____ / _____ / _____
Will you receive a scholarship for this internship?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is this internship a part of a course (credited)?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is this internship mandatory for completing your diploma?		<input type="checkbox"/> Yes	<input type="checkbox"/> No

Approval : \_\_\_\_\_  
 Marianne Arteau, Academic Affairs Advisor  
 CHU Sainte-Justine Research Center

The internship is subject to approval by the Centre's Academic affairs.  
**The internship must be part-time and cannot be remunerated.**

Please submit this form and the proof of enrolment in the study program to [affaires\\_academiques@recherche-ste-justine.qc.ca](mailto:affaires_academiques@recherche-ste-justine.qc.ca) at the latest 3 weeks before the beginning of the internship.