Brock International
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T 905-688-5550 ext 6160 | F 905-688-2074 | brocku.ca

***Ciência Sem Fronteiras* (CsF) Research/Industry Internship Placement Confirmation Form**

Student name: _____

Main Supervisor/Mentor: _____

Email address of Supervisor/Mentor: _____

Host Employer/Institution: _____

Address: _____

City: _____ Province: _____

Postal Code: _____ Phone Number: _____

Placement Start Date: _____ End Date: _____

(All research/industry internship placements should be full-time for a duration of four months or a total of 450-560 hours)

Please provide a brief description of the main activities which will take place during the research/industry internship placement. Please also list anything required of the student (i.e. safety training, special workshops, courses the students should register for or unofficially audit, etc):
(To be completed by the Supervisor/Mentor)

Objectives/Tasks
Requirements of Student

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By signing the following form, you agree that the placement will meet the following criteria regarding research/industry internship placements for the *Ciência sem Fronteiras* (CsF) Scholarship Program:

- be a full-time unpaid placement, which means approximately 35 hours per week, or 450-560 hours over 3-4 months;
- offer a discipline-related learning opportunity;
- allow for applied work experience related to a student's field of study;
- immerse students in the Canadian work environment and culture;
- expose students to a collaborative team-work environment; and
- give students access to a supervisor/mentor within the organization/institution, as well as regular supervision and evaluation by the supervisor.

Agreement of CsF Supervisor

I, having read this letter, hereby agree to comply with all the terms and conditions contained herein and further agree to ensure that the CsF student and all participants supporting the supervision of this student are informed of their obligations under the provisions of this letter

Supervisor/Mentor Signature: _____ Date: _____

Agreement of CsF Student

I, having read this letter, hereby agree to comply with all the terms and conditions contained herein and further agree to fulfill the objectives/tasks outlined by the supervisor under the provisions of this letter. I understand that special arrangements have been made for me to participate in this placement, and that I will be expected to follow through on my commitment.

Student Signature: _____ Date: _____

Please direct any questions you have regarding the responsibilities and administration of this placement to my attention. Thank you for the support of this student and the Canada-Brazil *Ciência sem Fronteiras* (CsF) Scholarship Program

Please return a signed copy of this letter to me by e-mail to jbowie@brocku.ca or by mail to:

Jade Bowie
Brock International
BROCK UNIVERSITY
500 Glenridge Avenue
St. Catharines, ON
L2S 3A1, Canada

Kind regards,

Jade Bowie

International Affairs Assistant
Brock International