## JCU- Intern-FORM-02 RD7005 Internship completion acknowledgement



JCU Graduate Research School (GRS)

## Academic Mentor and Industry Partner to complete

Candidate's Details							
51 1 (6)							
First /Given Name:							
Surname / Family Name:							
Student ID:							
Internship o	details						
Internship Name							
Length of Internship							
Dates							
The candidate has successfully completed							
Mid Internship report			×	Yes		No	
Mid Internship presentation				Yes		No	
Final presentation				Yes		No	
Final Report				Yes		No	
		Mentor and Industry Partners					
grading, the College Associate Dean of Re Recommended			Justification	11011 3110010 20 001		isi misianeo.	
	Outcome  Pass		The Candida	te's work is of a sui	table scope a	nd standard for	
			an industry in	ternship and they	have demons	trated the	
			resources av	complete the proje ailable.	ect in a timely	manner with the	
	Fail			te's work is not of o ternship of 3-5 mor			
				d the capacity to	•		
			timely manne	er with the resource	es available.		
Candidate	7						
	,						
Name							
Signature							
Date							

Academic Mentor	
Name	
College/Institute	
Signature	
Date	
Comments (if any)	
Industry Partner	
Name	
Signature	
Date	
Comments (if any)	
What to do next Please submit this for to grs@jcu.edu.au	rm electronically to the Graduate Research School along with the mid and final reports