



# UCI Samueli School of Engineering

**Graduate Student Affairs Office**  
204 Rockwell Engineering Center  
Phone: (949) 824-8090  
Email: gradengr@uci.edu

## CPT ADVISOR AUTHORIZATION REQUEST FORM

This form must be completed by the student's Ph.D. advisor and turned in to the Graduate Student Affairs Office during the quarter before the internship is requested.

Name: ''

Program:

Student ID #: "

""Email Address:

Faculty Advisor Name:

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*For which quarter is the internship requested?*

Fall

Winter

Spring

Summer

Year

*Additional comments regarding the student's overall progress:*

*Final Advisor recommendation for the student to be in an internship:*

Support

Does Not Support

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*Verified by (please sign):*

Faculty Advisor

Date