**TUNG WAH COLLEGE**

**Student Affairs Office**

**Work-Integrated Learning Programme**

**Application for Approval for Self-Sourced Internship**

*Students should submit this form prior to the commencement of the internships:*

1. *to the School Dean for endorsement;*
2. *to SAO for final approval.*

*All fields are mandatory.*

**PART A – STUDENT INFORMATION**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Student name: |  |  | Programme of study: |  |
| Student ID: |  |  | Major of study: |  |
| Cohort: |  |  | Contact number: |  |

**PART B – INTERNSHIP INFORMATION**

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name of organisation: | |  | | | | | | | | | | |
| Address: | |  | | | | | | | | | | |
| Industry/sector: | |  | | | | | | | Website: | |  | |
| Contact person: | |  | | | | | | | Position: | |  | |
| Telephone number: | |  | | | | | | | Email: | |  | |
| Department to join: | |  | | | | | | | | | | |
| Intern title: | |  | | | | | | | | | | |
| Internship duties: | |  | | | | | | | | | | |
|  | |  | | | | | | | | | | |
| Internship location(s): | |  | | | | | | | | | | |
| Internship period: | | from |  | | | to |  | | | |  | |
|  | |  | (dd/mm/yyyy) | | |  | (dd/mm/yyyy) | | | |  | |
| Total expected no. of working hours: | | | | |  | | | (must be equivalent to no fewer than 40 hours per week) | | | | |
| Salary/allowance: | | HK$ |  | | | | | | | 🞏 per month 🞏 per day 🞏 per hour | | |
| Provision of relevant documents: | | | | 🞏 Employment contract 🞏 Appointment letter 🞏 Reference letter | | | | | | | | |
|  | | | | 🞏 Job advertisement 🞏 Others, please specify: | | | | | | | |  |
|  | | | | (please attach a copy for internal reference if applicable) | | | | | | | | |
| 🞏 | I declare that this internship involves / does not involve\* employer-employee relationship. | | | | | | | | | | | |
| 🞏 | I understand that this application does not imply approval from my academic school at TWC and that the final decision on accepting this self-sourced WILP internship lies completely with the College. | | | | | | | | | | | |

Student Signature: Date:

**PART C – APPLICATION STATUS**

Endorsed / not endorsed\* because:

Signature: Date:

(School Dean/ Programme Leader)

Approved / Disapproved\* because:

Signature: Date:

(Head of Student Affairs)