

Application for validation of an internship outside the ISA portal

This form should be sent to the [SNX](#) secretariat duly completed and signed by all the parties before the internship starts

Internship

| | | |
|------------------------------------|----------|---------|
| Company name and address | Website | Country |
| Company description | | |
| Name and contact of the supervisor | | |
| Students tasks | | |
| Start date | End date | |

| Student concerned | | | |
|-------------------|--|------|-----------|
| Name, first name | Current semester <input type="checkbox"/> MA1 <input type="checkbox"/> MA2 <input type="checkbox"/> MA3 <input type="checkbox"/> MA4 | Date | Signature |

Deputy of student's section

| | |
|--|-----------|
| <i>By his signature, the deputy confirms that the internship proposed by the student is valid.</i> | |
| Date | Signature |
| Remarks | |

In this document, the masculine gender is used in the neuter sense and refers to women as well as men.