**Application for a CREATE-sponsored Internship in Complex Dynamics**

Please complete this form and have your supervisor and internship partner sign the form. Scan and email the form to dynamics.create@gmail.com. (The signatures can be sent on different copies of the form, but each copy must be completed.). An updated CV must be attached to the email. Applicants should ALSO attach a short description of the project to be pursued in the proposed internship.

1. Please list your current university and degree program, and academic supervisor.
2. With which internship partner do you wish to hold an internship?
3. Please list the proposed start and end dates of the internship.
4. Do you plan to stay at the internship site for the entire duration of the internship? Please note that any change in the 16-week duration will need to be specified in advance and agreed to by all signatures below.
5. List all sources of non-CREATE funding that the trainee will hold for the period of the internship. (i.e. TA, research assistantship, etc)
6. Do you expect to need reimbursement for travel costs to the internship site (if it is in a different city than your training site)? If so, list the cities between which you expect to be travelling.

Have you attached a short (1 page or less) description of the proposed internship?

NOTES: By signing this application, the internship trainee agrees to provide a final report (contents to be specified at a later date) to the CD-CREATE staff within 3 months of completion of the internship.

 By signing this application, the internship partner agrees to provide $1000/month to the trainee for the 4-month (16 week) duration of the internship. By signing this application, the supervisor agrees that the trainee is in good standing in their academic program. Pending approval, the CREATE staff agree to provide matching funds of $1000/month to the trainee during the same time period.

Name of Trainee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Trainee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Current Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Internship Partner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Partner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Location/Company name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_