



Supervisory Consent Form for Co-op Internship (MSc)

Student Information

Given Name: _____ Family Name: _____ Degree: _____

Student Number: _____ Email: _____ Program Start Date: _____

Graduate students are required to obtain the approval of their advisors/supervisors before applying for co-op internships. Please read the following carefully, sign and return a copy to the department's Graduate Program Office (grad-admin@cs.ubc.ca). Supervisor's approval is mandatory for each internship placement. If a supervisor has not yet been secured, the advisor's signature is needed (a new form is required if there is a change in the student's supervisor or if the current advisor does not become the supervisor).

If the student is holding awards (CGSM, etc.), please make sure that an [award interruption form](#) is submitted before the Work Term.

By signing this agreement form, both the graduate student and the advisor(s)/supervisor(s) confirm that:

1. Eligibility

Please complete all checkboxes unless otherwise indicated:

- The work term is not in the first term or last term of student's program
- The student has not already participated in **two** work terms

2. Work Term Schedule

Please check the work term(s) in which the student would like to start this internship (e.g., May 1 - August 31, 2025).

- September 1 - December 31, _____
- January 1 - April 30, _____
- May 1 - August 31, _____

3. Stipend

Given that graduate students will be working and paid full time during the co-op period, the supervisor will not provide any stipend during the co-op work term. Under normal circumstances, students should not have substantial duties outside of their internship.

Signatures:

Advisor's/Supervisor's Signature

Name

Date (yyyy/mm/dd)

Student's Signature

Name

Date (yyyy/mm/dd)