

CERTIFICATE OF INDUSTRIAL EXPERIENCE

UNDERGRADUATE BACHELOR OF ENGINEERING STUDENTS

This form should be completed by the Employer and returned by the Student Employee to the Faculty Student Administration Office located at Room D332 at Footscray Park campus.

The University appreciates the cooperation of employers in arranging and certifying relevant industry work for our future engineers.

NAME OF COMPANY OR EMPLOYER: ADDRESS:

SUPERVISOR'S NAME: JOB TITLE: SECTION: DEPARTMENT: CONTACT PHONE NUMBER: EMAIL ADDRESS:

STUDENT NAME: STUDENT ID NO: COURSE:

COMMENCING DATE: FINISHING DATE: (Number of equivalent full time (FT weeks (1FT week=35 hours): Brief description of the work undertaken by the student:

Supervisor's Signature.....Date.....