Portal to Discovery @ Brookhaven National Laboratory
Office of Educational Programs

DOE INTERNSHIP PROGRAM

SEMESTER STUDENT REQUEST FORM

Please indicate for which program you are requesting an intern:

- ☐ **Summer Undergraduate Research Program (SULI)**
- ☐ **Community College Internship (CCI)**
- ☐ **Visiting Faculty Program (VFP)**

Start Date:_____ **End Date: _____**

To: _____
Chairperson/Head Department/Division Approval Signature

From: _____
(Advisor) (Ext.) (Email) (Bldg.)

DOE will support interns for research projects that support its mission and fall within the 12 core technical capabilities which underpin activities at BNL. Please circle which of these core capabilities and funding sources apply to this research project:

Core Capabilities

1. Particle Physics
2. Nuclear Physics
3. Accelerator Science and Technology
4. Condensed Matter Physics and Materials Science
5. Chemical and Molecular Science
6. Climate Change Science
7. Biological Systems Science
8. Applied Nuclear Science and Technology
9. Applied Materials Science and Engineering
10. Chemical Engineering
11. Systems Engineering and Integration
12. Large Scale User Facilities/Advanced Instrumentation

Funding Sources

1. Office of Science –Advance Scientific Computing Research
2. Office of Science - Basic Energy Sciences
3. Office of Science - Biological Research
4. Office of Science – Fusion Energy Science
5. Office of Science – High Energy Physics
6. Office of Science – Nuclear Physics
7. DOE – Energy Efficiency & Renewable Energy
8. DOE – Environmental Management
9. DOE – Fossil Energy
10. DOE – Electricity Delivery & Energy Reliability
11. DOE – Legacy Management
12. DOE – Nuclear Energy
13. DOE – National Nuclear Security Administration
14. Laboratory Directed Research and Development
15. Other *(please specify):* _____

Title of Project:

Description of Assignment:

Suggested reading:

1st Choice Student_____

2nd Choice Student_____

3rd Choice Student_____

Please complete the following:

GIS Administrator or Dept. Contact _____2-Letter Dept Code _____

Charge $_____ to Project Acct. #: _____ Activity Acct. #: _____Budget Authority Signature_____

Department Education Coordinator Acknowledgement: _____
Signature Date

Please return to Science Education Center, Bldg. 438 Attention: Cindi Biancarosa Ext. 4000