

SoET Verification of Internship

Student Name/PUID: _____

Dates of Internship: _____

Company Name: _____

Location: _____

Top Three Responsibilities:

1.

2.

3.

Supervisor Signature: _____ Date: _____

Supervisor Contact Information (email): _____

Receipt Date and SoET Advisor Initials: _____

As a student pursuing a major within the School of Engineering Technology at Purdue University, you are required to complete a professional experience.

Once completed, this form can be submitted to your assigned academic advisor digitally or hard copy when you return to campus.