



ORIC Oriented Industry Internship Program

Application Form

Office: 021-35071856-7-8 Ext 2011 Email: oric.su@sohailuniversity.edu.pk

Personal Information:

Date.....

Full Name: _____

Student ID: _____ Department/ Institute: _____

Specialized Field: _____ Year of Study: _____

Email: _____ Contact #: _____

Internship Details:

Preferred Internship Start Date: _____

Preferred Internship Duration (in weeks/months): _____

What skills or knowledge do you hope to gain from this internship?

Attachments:

- Resume/CV (E-mail soft copy to oric@sohailuniversity.edu.pk)
- Cover Letter (optional)

Signature of Applicant

Head of Department

Dean

Signature.....

Date:

Signature.....

Date: