**Training / Internship Program Questionnaire**

**(for Mentors and Supervisors)**

**Extension**

**Top of Form**

1. **Trainee/Intern Name**:  Click here to enter text.
2. **Primary Supervisor Name**: Click here to enter text.

(This is the person who will meet with the student at least once a week, and who is named on the visa paperwork as being responsible for the Intern or Trainee. If the Primary Supervisor might be away from Fermilab for more than 5 days in a row, an Alternate Supervisor MUST be named who can meet with the Intern during the absence.)

1. **Primary Supervisor's Fermilab Job Title**: Click here to enter text.
2. **Primary Supervisor's Telephone Extension**: Click here to enter text.
3. **Primary Supervisor's Email**:  Click here to enter text.
4. **Alternate Supervisor Name**: Click here to enter text.

(This person will fill in for the Primary Supervisor if s/he is absent from Fermilab for more than 5 days. If Alternate Supervisor is not named, the Primary Supervisor MUST meet with the Intern/Trainee at least once a week, as attested to in the visa documents. The Alternate Supervisor may also be the Mentor.)

1. **Mentor/Tutor** (if any): Click here to enter text.

(This is the person who might assist with guidance or training in a day-to-day basis, but is NOT named as being responsible for the Intern or Trainee)

1. **Name of Division**:  Click here to enter text.
2. **Name of Department**:  Click here to enter text.
3. **Name of Group** (if any):  Click here to enter text.
4. **General Description of Department or Group activities**:  Click here to enter text.
5. **Name of Contact Person for Internship/Training Program (if any)** (insert the name of the primary person within the Group or Department who may be contacted with day-to-day or administrative questions about the program or Intern/Trainee, such as salary, start dates, travel plans, accommodations, etc.): Click here to enter text.
6. **NEW End date** (this is the new date for completion of the program): Click here to enter text.
7. **Overview of purpose or reason for extension** (please explain why it is necessary/advantageous for the program to be extended.): Click here to enter text.
8. **Is the extension needed to complete the goals or activities of the original program?** (In other words, is the extension needed because the original program could not be completed as anticipated within the original timeframe):

Click here to enter text.

1. **Please explain how the new research activity or project addresses the development of more advanced skills, or a different field of expertise:**

Click here to enter text.

1. **Brief Description of the Intern's / Trainee's role in the new or extended activity** (e.g advance understanding of accelerator simulation and modeling):

Click here to enter text.

* 1. Please explain briefly how this relates to the work performed at Fermilab generally: Click here to enter text.
	2. What advantage do these opportunities provide to the Trainee/Intern? Click here to enter text.
1. **Specific Goals and Objectives for the Trainee/Intern for EACH PHASE** (i.e. Intern will become proficient at mathematical optimization techniques required for wire chamber alignment to perform a data run and Drell-Yan analysis; The Intern will learn how to work Front End prototype boards controlled by the mail control system; The Intern will be able to understand and analyze QCD events with diphotons in collaboration with other members of the QCD team; Intern will help apply NOvA event reconstruction to neutrino oscillation analysis to participate in the analysis of particles’ mass hierarchy):

Click here to enter text.

1. **Specific Tasks or Activities to be performed by the Trainee/Intern for EACH PHASE** (if there is to be a progression in the activities (i.e. first Task 1, completion of which will enable work on Task 2), then please enumerate the Tasks or Activities):

Click here to enter text.

1. ***New areas of Knowledge* to be imparted to the Trainee/Intern** (i.e.: C programming; VHDL programming; signal transmission; process of turning ASIC design into reality; heavy quark physics concepts; energy deposition in NOvA detector; QCD subfields in hadron colliders):

Click here to enter text.

1. ***New or Different Skills* to be imparted to the Trainee/Intern** (i.e.: software development for PIC microcontrollers; Monte Carlo simulation generation and tuning; construction of wire chamber; design and simulation of performance of VIPRAM chip; software and VHDL firmware development for testing):

Click here to enter text.

1. ***New Techniques* to be imparted to the Trainee/Intern** (i.e.: ASIC design & performance simulation; VHDL firmware; C coding; analog design techniques for new optical devices; mixing analog and digital design; GRID techniques; Detector data analysis through simulation and custom software; develop ability to make & interpret conditional distribution plots using ROOT/CINT and C++):

Click here to enter text.

1. **Please explain your 'methodology' for the training or internship** (in other words, please explain the how specifically will these Knowledge (Question #18), Skills (#19), and Techniques (#20) be taught? Include specific tasks and activities (for Interns) and/or methodology of training and chronology/syllabus (for Trainees):

Click here to enter text.

1. **List the major equipment or tools the Trainee/Intern will use, or learn to use, during the training/internship program**:

Click here to enter text.

1. **List the major computer software applications/programs the Trainee/Intern will use or learn to use during the training/internship program**:

Click here to enter text.

1. **List the areas of Fermilab where the Trainee/Intern will work**:

Click here to enter text.

1. **Please list the types of professionals with whom the Trainee/Intern will interact** (Scientists, Engineers, Theoretical Physicists, etc.):

Click here to enter text.

1. **Will the Trainee/Intern interact with members of other Groups, Departments or Divisions** (during work time)**?**

 [ ]  Yes  [ ]  No

* 1. If so, please list the other Groups, Departments or Divisions: Click here to enter text.
	2. Why do you want the Trainee/Intern to interact with this other Group, Department or Division?  What will be the benefit to the Trainee/Intern or Group? Click here to enter text.
1. **Will there be a paper written by the Trainee/Intern**?

[ ]  Yes  [ ]  No

1. **Will the Trainee/Intern prepare a presentation of what s/he learns during the training/internship program?  To whom will this be presented**?

[ ]  Yes  [ ]  No  If yes: Click here to enter text.

1. **Will the Trainee/Intern be assigned outside reading materials?**  If so, please maintain a list of what is assigned, to be provided to the Visa Office at the end of the training/internship program.

[ ]  Yes  [ ]  No

1. **Will the Trainee/Intern attend outside conferences, talks, presentations, schools or workshops?**

   [ ]  Yes  [ ]  No

If so, please list any that you already have identified, or describe the sorts of events to which you might direct the Trainee/Intern to attend.  Please ensure that you retain a list of any such outside events actually attended by the Trainee/Intern, to be provided to the Visa Office at the end of the training/internship program.

Click here to enter text.

1. **How will the Primary Supervisor, Alternate Supervisor, and/or Mentor work together to supervise, guide and evaluate the Trainee/Intern?** (Will there be meetings between the Trainee/Intern and each of the Primary or Alternate Supervisor(s) or Mentor? How will absences by Supervisors or Mentors be covered and communicated? How will the Primary and Alternate Supervisor(s) and the Mentor communicate between themselves in their evaluation of the Trainee/Intern? How will the evaluation be conducted and then communicated to the Trainee/Intern?)

Click here to enter text.

1. **What will completion of the training program enable the Trainee/Intern to do next, once s/he completes the program and returns to his/her home country and home institution?**

Click here to enter text.

1. **If you can, please describe how this training activity might fit within the Trainee/Intern’s overall career plan:**

Click here to enter text.

1. **What advantage does the Trainee/Intern’s participation in the training/internship program bring to Fermilab?**

Click here to enter text.

1. **Please add anything else you have to say here:**

Click here to enter text.

**REQUIRED: I agree that this information is true and correct:** [ ]  **Yes** [ ]  **No**

**PRINT NAME:** Click here to enter text. **Fermi ID #:** Click here to enter text.