

Internship Learning Contract Cover Sheet

(Please attach this sheet to the front of the learning contract.)

Please Print:

INTERN NAME _____ MAJOR _____

PLACEMENT SITE _____ SCHEDULED HOURS _____
(12 hours per 3 credits)

FACULTY ADVISOR _____ AGENCY SUPERVISOR _____

CREDITS _____

To achieve the goal of meaningful student learning and professional experience, the agency, faculty advisor, and participating student agree to the following requirements:

PARTICIPATING STUDENT:

- 1) Work the contracted number of hours per week during the course of the academic term.
- 2) Fulfill the required fieldwork and academic components of the internship as outlined in this contract and go beyond when feasible.
- 3) Follow the procedures, policies, and regulations of the sponsoring agency/ organization in an ethical and responsible manner.
- 4) Complete written journal requirements.

SPONSORING AGENCY/ ORGANIZATION:

- 1) Evaluate the student's work and progress as an intern fairly and continuously in relation to the learning objectives included in this contract.
- 2) Make a genuine effort to give the student meaningful assignments that are in the best interest of the student's educational and professional goals.
- 3) Complete a final evaluation of the student's performance at the conclusion of the internship.
- 4) When possible, meet with the student's faculty advisor.

FACULTY ADVISOR:

- 1) Meet with the student intern on a regularly scheduled basis to discuss theoretical and practical aspects of the internship.
- 2) Evaluate the intern's performance based on criteria established at the outset of the internship (performance in agency/ organization, discussions, final paper, etc.).
- 3) At the conclusion of the student's internship, recommend a S/U grade.
- 4) When possible, meet the student's agency/ organization supervisor.

_____ Student's Signature	_____ Date	_____ Faculty Advisor's Signature	_____ Date
------------------------------	---------------	--------------------------------------	---------------

_____ Agency Supervisor's Signature	_____ Date
--	---------------