



Internship Learning Agreement

Disclaimer: This agreement is a document created and suggested for use by the Snow College Career Center. Please check with your faculty internship coordinator or department chair to determine whether or not you need to complete this agreement or their own department specific agreement.

Directions:

- Step 1: Complete the form and review it with your faculty supervisor and host employer. Revise as necessary.
- Step 2: Ensure the form is free of error. Check spelling, grammar, and sentence completion.
- Step 3: Sign it and obtain signatures from your employer and your faculty supervisor.
- Step 4: Make a copy for your employer, keep a copy, and upload the final copy to Canvas for your Faculty Supervisor. (Uploading a final copy is a canvas course assignment.)

Student Information:

Name:	Badger ID:
Email:	Major or Program of Study:

Internship Site Information:

Company or Host Organization:	Site Supervisor name:	
Organization Address:		
Site Supervisor Phone	Site Supervisor Email	
Start Date:	End Date:	Hours Per Week:

Learning Objectives:

List your primary learning objectives. Describe what you hope to learn and accomplish from this experience. You are required to complete at least one objective per credit. The number of objectives you wish to establish is not as important as the significance of each objective and the time required to complete them.

OBJECTIVE 1: (What will you do?)

Estimated hours to complete objective:

Date of Completion (Estimated):

Method of Measurement: (How will your Employer and/or Faculty Supervisor evaluate your accomplishment? What will be the criteria for the measurement of your success?)

OBJECTIVE 2: (What will you do?)

Estimated hours to complete objective:

Date of Completion (Estimated):

Method of Measurement: (How will your Employer and/or Faculty Supervisor evaluate your accomplishment? What will be the criteria for the measurement of your success?)

OBJECTIVE 3: (What will you do?)

Estimated hours to complete objective:

Date of Completion (Estimated):

Method of Measurement: (How will your Employer and/or Faculty Supervisor evaluate your accomplishment? What will be the criteria for the measurement of your success?)

OBJECTIVE 4: (What will you do?)

Estimated hours to complete objective:

Date of Completion (Estimated):

Method of Measurement: (How will your Employer and/or Faculty Supervisor evaluate your accomplishment? What will be the criteria for the measurement of your success?)

***You may add more objectives. If the objectives change throughout the course of the internship, the student is responsible for revising the objectives and gaining approval from the Employer and Faculty Supervisor before the end of the internship.*

Description of Internship:

- 1. Provide a job description outlining your specific responsibilities, project, and/or tasks.**
- 2. How frequently will you receive feedback from your Site Supervisor? When and how will your job performance be evaluated?**
- 3. Provide specific dates when the projects, written work or other culminating activities are due to your Site Supervisor or Faculty Supervisor.**
- 4. Describe your arrangement for continual contact with your Faculty Supervisor throughout the semester**

Agreement:

Intern: I agree with and accept the academic and work assignments within this agreement. I will complete all work and academic assignment to the best of my ability. I accept the obligation of confidentiality in my work and will familiarize myself with and adhere to the employer’s relevant policies/procedures and appropriate standards of ethical conduct.

Site Supervisor: I have discussed this internship with the intern and we have agreed upon the assigned work components appearing above. I agree to meet with the intern regularly to provide assistance, training, and consultation to the intern in order to help them progress toward the aforementioned learning objectives. I also understand that an employer evaluation will be provided to me at the end of the semester. I will complete the evaluation form and meet with the intern to discuss the evaluation by the end of the semester.

Faculty Supervisor: I have discussed this internship with the intern and agreed upon the scope and responsibilities performed by the intern. I will support the intern through periodic meetings and evaluate their progress to date, and at the end of the experience. I will check periodically with the site supervisor to measure progress of the internship experience. I will award a final grade or P/F on the experience based on the intern’s performance and completion of objectives.

ALL: We will honor the consideration

Signatures:

Intern _____ **Date** _____

Site Supervisor _____ **Date** _____

Faculty Supervisor _____ **Date** _____