

INTERNSHIP AGREEMENT FORM

College of Humanities and Social Sciences

(PLEASE DO NOT LEAVE ANY FIELDS BLANK)

Student Information During Internship

Student's Name (Last, First): _____ Student ID: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

Major: _____ Internship Site: _____

Internship Supervisor Information

Supervisor's Name (Last, First): _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

Internship Start and Finish Dates: _____ Number of Credits: _____

IMPORTANT:

This learning agreement is to be completed and signed by the student and faculty advisor. The completed, signed form must be submitted to your FIA no later than two weeks after beginning your internship.

1. FACULTY INTERNSHIP ADVISOR: I have discussed and negotiated with the student the academic component as indicated on the learning contract. I concur with the stipulations of this agreement. **I agree make a minimum of two contacts with the student to discuss the internship experience and to evaluate the quality of the internship experience. I further agree to talk specifically with the site supervisor at least once during the internship experience regarding the student's performance.**

Faculty Internship Advisor's Signature

Date

Phone

2. STUDENT INTERN: I concur with and accept the academic and work assignments indicated in this learning agreement. I agree to complete all work assignments promptly and to the best of my ability. I accept the obligation of confidentiality in my work and relationship with the work supervisor. I agree to familiarize myself with and adhere to the relevant organizational policies and procedures and the appropriate standards of ethical conduct. I agree that for an internship sites requiring a background check not covered by the internship site, I am responsible for any background check costs. Further, I understand there are ordinary risks inherent in the workplace and I will become aware of and consent to undertake such risks. I also understand that Carroll University has no control over any hazards to which I may be exposed during the internship and do not hold the University liable for any accidents that may occur.

Student Intern's Signature

Date

Phone