PENN STATE HARRISBURG

School of Humanities

I HUM 495: Internship

INTERNSHIP LEARNING CONTRACT

(Submit This to the faculty coordinator by the end of the second week of the internship.)

Student Name: PSU ID #:

Date: Email:

Your address (residence and mailing address) during the internship:

Name and Address of Sponsoring Organization:

Administrative Offices:

Field Site:

Name of Organization’s Internship Supervisor(s):

Title:

Email address: Telephone:

Length of Internship:

Beginning: Ending: Number of Hours Per Week:

Estimated Total Number of Hours: Number of Credits:

Describe the general duties of the internship and how you think it will relate to your educational and career goals. (Use additional paper if necessary.)

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TO BE COMPLETED BY THE STUDENT

What was your rationale for selecting this organization?

TO BE COMPLETED BY THE STUDENT AND THE INTERNSHIP SUPERVISOR

What are the work products or assignments that you and your organization would like the student to complete?

(Note: These are in order by amount of time devoted to each category with the first being greatest amount of time)

Signatures

Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approvals: The signatures below indicate that these individuals have read this contract and approve it as an appropriate work/learning experience:

Site Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Faculty Coordinator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_