**NOT FOLLOWING THE INSTRUCTION SHEET WILL DELAY THE PROCESSING OF YOUR APPLICATION**

**Deadline for Application:**
- Fall/Spring Semester: 4th class day after start of semester.
- Summer: 2nd class day after start of semester.

**Registering for Internship:**
The following documents must be completed as outlined below and returned to the Internship Office (Moody 204) in a timely manner in order to be registered for an internship:

<table>
<thead>
<tr>
<th>NAME OF SHEET</th>
<th>PAGE</th>
<th>WHO’S RESPONSIBILITY?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student Application</td>
<td>6</td>
<td>The Student</td>
</tr>
<tr>
<td>Internship Contract Packet</td>
<td>7</td>
<td>The Student</td>
</tr>
<tr>
<td>Internship Information Sheet</td>
<td>8</td>
<td>The Supervisor OR The Student</td>
</tr>
<tr>
<td>Internship Learning Agreement</td>
<td>9-11</td>
<td>The Supervisor OR The Student</td>
</tr>
<tr>
<td>Internship Learning Contract</td>
<td>12-14</td>
<td>The Supervisor OR The Student</td>
</tr>
</tbody>
</table>

Pages 1-5 should NOT be returned with the application.

The Supervisor is to keep the Work Evaluation (Page 3) until the end of the internship (HRTM students have a different evaluation form, which can be printed from Moodle after the student is registered for the course).

Please include your CLID on the bottom of each page of the application.

**THE FOLLOWING SIGNATURES ARE NEEDED BEFORE AN APPLICATION IS CONSIDERED COMPLETE:**
- Employer’s Signature on page 11 and 13
- Student’s Signature on page 6 and 13
- Faculty Advisor’s Signature on page 14

Once the Student Internship Application is complete and (Pages 4-12) returned to the Internship Office, the student will be registered for the course if qualifications are met.

<table>
<thead>
<tr>
<th>MAJOR</th>
<th>FACULTY ADVISOR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accounting</td>
<td>Pam Meyer MX 301 482-6083</td>
</tr>
<tr>
<td></td>
<td><a href="mailto:pmeyer@louisiana.edu">pmeyer@louisiana.edu</a></td>
</tr>
<tr>
<td>BLAW</td>
<td>Geoffrey Stewart MX 332C 482-5915</td>
</tr>
<tr>
<td></td>
<td><a href="mailto:gstewart@louisiana.edu">gstewart@louisiana.edu</a></td>
</tr>
<tr>
<td>Economics, Finance, and Insurance and Risk Management</td>
<td>Anthony Greco MX 344 482-6669</td>
</tr>
<tr>
<td></td>
<td><a href="mailto:ajg1979@louisiana.edu">ajg1979@louisiana.edu</a></td>
</tr>
<tr>
<td>Hospitality Management</td>
<td>Johnathon Trahan MX 302 482-1580</td>
</tr>
<tr>
<td></td>
<td><a href="mailto:jtrahan@louisiana.edu">jtrahan@louisiana.edu</a></td>
</tr>
<tr>
<td>Management</td>
<td>Oliver J. “Buster” LeBlanc, III</td>
</tr>
<tr>
<td></td>
<td>MX 225 482-6654</td>
</tr>
<tr>
<td></td>
<td><a href="mailto:oj1383@louisiana.edu">oj1383@louisiana.edu</a></td>
</tr>
<tr>
<td>Marketing</td>
<td>Lucy Henke MX 353 482-6348</td>
</tr>
<tr>
<td></td>
<td><a href="mailto:henke@louisiana.edu">henke@louisiana.edu</a></td>
</tr>
<tr>
<td>Petroleum Land Management</td>
<td>Oliver J. “Buster” LeBlanc, III</td>
</tr>
<tr>
<td></td>
<td>MX 225 482-6654</td>
</tr>
<tr>
<td></td>
<td><a href="mailto:oj1383@louisiana.edu">oj1383@louisiana.edu</a></td>
</tr>
<tr>
<td>MBA Internships†</td>
<td>Bob Viguerie MX 328 482-5882</td>
</tr>
<tr>
<td>See footnotes on page 2.</td>
<td><a href="mailto:mbadirector@louisiana.edu">mbadirector@louisiana.edu</a></td>
</tr>
</tbody>
</table>

CLID: _________________ 1
THE UNIVERSITY OF LOUISIANA at LAFAYETTE
BUSINESS INTERNSHIP PROGRAM

Mission

The mission of the Moody College of Business Administration’s Internship Program is to provide undergraduate and graduate students an opportunity to integrate theoretical knowledge gained in the classroom with practical job experience in preparation for postgraduate employment.

Minimum Student Qualifications

In general, students must be juniors or seniors in upper division, with an adjusted GPA of 2.5 or above before applying for an internship (Please note that you are required to have an adjusted GPA of 2.3 or higher to register for HMGT 498 or MGMT 475.) Business majors with a business minor may elect to complete an internship in their minor field of study. The appropriate Internship Advisor and the Internship Director must approve the application for the internship. Graduate students, by virtue of admission, already meet the aforementioned requirements, but do need approval from the MBA Director before proceeding with the application. In addition, please note the following course-specific requirements:

- ACCT 398 and 498: “C” or better in ACCT 302
- HMGT 498: HMGT 331, HMGT 351, HMGT 371, MKTG 345, MGMT 320, and ACCT 202 must be completed with a grade of “C” or better in each. This internship must be completed in the last 18 hours of coursework.
- MGMT 475: Must be PLRM major.
- MKTG 398: Completed at least 9 hours of MKTG courses with “C” or better in each

Benefits to the Student

1. Eases the transition from the classroom to the work world
2. Provides a record of work experience which should help in securing full-time employment upon graduation
3. Helps develop a personal work ethic.
4. Makes practical application of classroom principles and theories
5. Supplements other college financing
6. Allows three semester hours of credit per enrollment period (limit of six hours total)

Benefits to the Participating Organization

1. Provides the organization with a pool of high quality potential employees.
2. Gives the organization an opportunity to assess the actual performance of a potential employee at minimal cost and risk.
3. Makes qualified part-time help available to supplement the regular work force, at the choice of the organization.
4. Generates satisfaction from helping develop tomorrow’s business leaders.

Evaluations

Evaluations are made to improve future internships.

1. Work supervisors evaluate the performance of interns using a standard instrument.
2. Interns complete a standard evaluation instrument and write a report on their internship experience.
3. Interns complete an evaluation of their employer.
Work Supervisor Evaluation of Student Intern
B. I. Moody III College of Business Administration
Internship Program
University of Louisiana at Lafayette
**Not to be completed until end of internship**

<table>
<thead>
<tr>
<th>Work Supervisor’s Name</th>
<th>Work Telephone</th>
<th>Organization</th>
<th>Work E-mail</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<thead>
<tr>
<th>Position</th>
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</table>

Student Intern’s Name: ____________________________  Semester/Term: ____________

**Instructions**: The intern’s work supervisor is requested to evaluate the student on the following criteria:

<table>
<thead>
<tr>
<th>Ability to work well with others</th>
<th>Excellent</th>
<th>Very Good</th>
<th>Average</th>
<th>Poor</th>
<th>Very Poor</th>
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<table>
<thead>
<tr>
<th>Quality of work</th>
<th>Excellent</th>
<th>Very Good</th>
<th>Average</th>
<th>Poor</th>
<th>Very Poor</th>
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<table>
<thead>
<tr>
<th>Attitude toward work</th>
<th>Excellent</th>
<th>Very Good</th>
<th>Average</th>
<th>Poor</th>
<th>Very Poor</th>
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<tbody>
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<table>
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<tr>
<th>Dependability</th>
<th>Excellent</th>
<th>Very Good</th>
<th>Average</th>
<th>Poor</th>
<th>Very Poor</th>
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<table>
<thead>
<tr>
<th>Ability to learn</th>
<th>Excellent</th>
<th>Very Good</th>
<th>Average</th>
<th>Poor</th>
<th>Very Poor</th>
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<tr>
<th>Intern’s benefit from program</th>
<th>Excellent</th>
<th>Very Good</th>
<th>Average</th>
<th>Poor</th>
<th>Very Poor</th>
</tr>
</thead>
<tbody>
<tr>
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</table>

<table>
<thead>
<tr>
<th>Decision-making ability</th>
<th>Excellent</th>
<th>Very Good</th>
<th>Average</th>
<th>Poor</th>
<th>Very Poor</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td>_____</td>
<td>_____</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Ability to apply academic training</th>
<th>Excellent</th>
<th>Very Good</th>
<th>Average</th>
<th>Poor</th>
<th>Very Poor</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td>_____</td>
<td>_____</td>
<td>_____</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Overall Performance</th>
<th>Excellent</th>
<th>Very Good</th>
<th>Average</th>
<th>Poor</th>
<th>Very Poor</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>_____</td>
<td>_____</td>
<td>_____</td>
<td>_____</td>
<td>_____</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Attendance: _____ Regular _____ Irregular</th>
<th>Punctuality: _____ Regular _____ Irregular</th>
</tr>
</thead>
</table>

Recommended Grade: _______________________
What traits may help or hinder the student’s career advancement?
______________________________________________________________________________

Additional Remarks (Use back of page if necessary):
______________________________________________________________________________

SUPERVISOR’S SIGNATURE ___________________________ Date __________

**SUPERVISOR MUST SUBMIT PAGE DIRECTLY TO THE INTERNSHIP OFFICE VIA EMAIL AT internship@louisiana.edu ***
Student Evaluation of Employer
B. I. Moody III College of Business Administration
Internship Program
University of Louisiana at Lafayette
**Not to be completed until end of internship**

Student’s name:
Company name:
Semester of internship:

This evaluation form pertains to the work experience component of your internship. It will not be shown to your internship employer. It is for the use of the Moody College of Business Administration Internship Program and your department.

Please rate how well the internship contributed to your personal and professional development on the following dimensions using a 1 to 5 scale, where 1 means the internship did not contribute at all to your development on this dimension and 5 means the internship contributed a great deal to your development on this dimension.

How well did the on the job experience in the internship contribute to your:

<table>
<thead>
<tr>
<th>Dimension</th>
<th>Did Not Contribute</th>
<th>Contributed A Great Deal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professional development:</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>Verbal communication skills</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>Written communication skills</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>Visual/presentation skills</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>Technical skills</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>Interpersonal skills</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>Organizational skills/responsibility</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>Ability to make additional career decisions</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>Understanding of your major field</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
</tbody>
</table>

Comments:

How much do you agree or disagree with each of the following statements?

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Disagree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>My supervisor strove to enhance my learning experience.</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>My supervisor was conscious of my needs as an intern.</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>My supervisor ensured that I had adequate direction for my work.</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>I was given an adequate amount of responsibility</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
</tbody>
</table>

CLID: _____________ 4
I was given professional level assignments.
The internship included an adequate training component.
My coursework prepared me for this employment experience.

Comments:

Any interesting stories, surprises, or challenges?

What suggestions can you offer for improving the internship experience?

Would you recommend this internship for future students? Why or why not?

Did you receive an offer of full-time employment from your internship employer? If so, did you accept?

***STUDENT MUST SUBMIT EVALUATION DIRECTLY TO THE INTERNSHIP COORDINATOR VIA EMAIL (internship@louisiana.edu) NO LATER THAN THE LAST DAY OF CLASSES. ***
Student Application
B. I. Moody III College of Business Administration
Internship Program
University of Louisiana at Lafayette

Directions: Complete the form and return it to the Internship Office (Moody Room 204) before the deadline:
Fall/Spring: Four (4) days after the first day of classes. Summer: Two (2) days after the first day of classes.

Name: __________________________________________ (Last) (First) (MI)

Current Address: ____________________________________________________________

City: __________________________ State: _____ Zip: ________ Cell Phone: ___________

Email Address: ________________________________________________________________

Work Phone: ___________________ Home Phone: ________________________________

Permanent Address: __________________________________________________________

City: __________________________ State: _____ Zip: ________ Phone: _______________

<table>
<thead>
<tr>
<th>Course Credit Desired</th>
<th>Semester/Year Internship Desired: ____________ (Semester) (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACCT 398</td>
<td>Major ________________________________________________________</td>
</tr>
<tr>
<td>ACCT 498</td>
<td>Minor (if applicable)</td>
</tr>
<tr>
<td>BLAW 398</td>
<td>Classification ______Junior _____Senior _____ MBA</td>
</tr>
<tr>
<td>ECON 399</td>
<td>Adjusted GPA ____________________________</td>
</tr>
<tr>
<td>FNAN (Also for INS RM) 398</td>
<td>Upper Division Status Yes ______No</td>
</tr>
<tr>
<td>HMGT 498</td>
<td>Core Courses in Major Completed Yes ______No</td>
</tr>
<tr>
<td>MGMT 398</td>
<td>MBA Course Credit TBD</td>
</tr>
<tr>
<td>MGMT 475</td>
<td></td>
</tr>
<tr>
<td>MKTG 398</td>
<td></td>
</tr>
<tr>
<td>MBA Course Credit TBD</td>
<td></td>
</tr>
</tbody>
</table>

I understand that I will need to meet with a Faculty Advisor, satisfactorily complete all required forms and reports, work at least 150 hours*, and complete the internship contract packet to receive credit for the course. I also agree to abide by all rules, regulations, and policies of the employer pertaining to my employment.

*PLRM majors are required to work at least 280 hours.

The University of Louisiana at Lafayette adheres to the principle of equal educational and employment opportunity without regard to race, sex, color, creed, or national origin. This policy extends to all programs and activities supported by the University.

GENERAL RELEASE

I understand that the University of Louisiana at Lafayette reserves the right to make cancellations, changes, or substitutions in cases of emergency or changed conditions or in the general interest of the internship program.

It is expressly agreed that the internship site and use of any and all of its facilities shall be undertaken by me at my own sole risk and that the University of Louisiana at Lafayette shall not be liable for any and all claims, demands, injuries, damages, actions, or causes of actions, whatsoever to me or to my property arising out of or connected with the internship and with the

CLID: _______________
use of any and all services, or facilities associated with the internship. I waive and hereby release the University of Louisiana at Lafayette, its governing board, officers, employees, and agents of and from any and all liability, causes of action, claims, or damages arising out of or related to any loss, damage, or injury sustained by any person (including myself) as a direct or indirect result of my participation in the internship.

I understand that the University of Louisiana at Lafayette is in no sense my employer, nor a party to contract. I further understand that the University has no control over industrial and other hazards to which I may be exposed while working for the employer; therefore, the University is not liable for any accident that may occur in connection with my internship employment.

Further, I hereby attest, to the best of my knowledge, that all the information I have provided in this form is correct.

Signature ___________________________________________ Date __________________________
Internship Contract Packet

B. I. Moody III
College of Business Administration
Internship Program
University of Louisiana at Lafayette

Name_______________________________________

Major_______________________________________

Minor_______________________________________

Course_______________________________________

Semester/Year_______________________________

Business_____________________________________

Faculty Advisor______________________________

If you have any questions, or would like to talk to someone about an internship, you may contact:

Sarah Duhon
Internship Coordinator
(MX 204, 337-482-5836)
internship@louisiana.edu

Dr. Brandi Guidry Hollier
Internship Director
(MX 256, 337-482-6211)
bng8618@louisiana.edu
THE UNIVERSITY OF LOUISIANA at LAFAYETTE
BUSINESS INTERNSHIP PROGRAM

Internship Information Sheet

DATE __________

NAME OF BUSINESS __________________________________________________________

ADDRESS _________________________________________________________________
(Street) (City) (ST) (Zip)

SUPERVISOR’S NAME _________________________________________________________

SUPERVISOR’S TITLE ______________________ PHONE ________________________

EMAIL ___________________________________________ WEBSITE ______________________________

INTERNSHIP JOB TITLE(S) ____________________________________________

IS THIS YOUR CURRENT JOB? □ YES* □ NO
*If YES, indicate how long you have been employed with the company, give a brief description of your current job duties, and explain how this internship will differ. Use back if necessary.

INTERN JOB DESCRIPTION (Please give consideration to job duties, diversity of job activities, increasing job responsibilities, etc.)

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

INTERNSHIP JOB LOCATION: ___________________________________________________________________

INTERNSHIP JOB REQUIREMENTS: ___________________________________________________________________

Safety or special equipment required: Yes ______ No ______ If yes, what?

UNUSUAL FACTORS (e.g., safety risks, etc.) ___________________________________________________________________

INTERNSHIP TRAINING PROGRAM (Specify training plans for intern student development)

________________________________________________________________________________________

INTERNSHIP STARTING SALARY / WAGE RATE ________________________________________________

COMPANY FRINGE BENEFITS ________________________________________________________________

CLID: ____________
AGREEMENT BETWEEN
THE UNIVERSITY OF LOUISIANA at LAFAYETTE
AND
______________________________________________
(Name of Business)

This AGREEMENT made and entered into by and between The University of Louisiana at Lafayette, B. I. Moody III College of Business Administration, hereinafter referred to as “University,” and
______________________________________________
(Name of Business)
______________________________________________
(Street Address)
______________________________________________
(City, State, Zip Code) hereinafter referred to as the “Business.”

WITNESSETH:
Whereas, the University and the Business share the following common objectives: (1) to provide practical experience and related instruction for students of the University enrolled in the internship program; (2) to improve the overall educational program of the University by providing opportunities for learning experiences which will permit the student to achieve advanced levels of professional competence and performance; and (3) to increase contacts between academic faculties and businesses for the fullest utilization of available teaching facilities and expertise.

NOW, THEREFORE, for and in consideration of the foregoing and in further consideration of the mutual benefits, the parties of this agreement agree as follows:

1. GENERAL INFORMATION
   (a) The internship program is designed as a learning experience for the student to ensure a full and meaningful business experience.

2. RESPONSIBILITIES OF THE UNIVERSITY
   (a) The University shall designate a faculty member to direct the program, which includes monitoring and assignment of eligible students to the Business.
   (b) The Faculty Advisor may call or visit the Business at regular intervals to monitor the progress of the student and the continuing development of the program.
   (c) The University will enforce rules and regulations that are mutually agreed upon by the University and the Business.
3. RESPONSIBILITIES OF THE BUSINESS

(a) The Business shall provide a planned, supervised program of business experiences.

(b) The Business shall maintain complete records and reports on each student’s performance and provide evaluations of the student as required on forms furnished by the University.

(c) The Business may request the University to withdraw any student from its facilities whose personal characteristics or performance prevent desirable relationships with the Business.

(d) The Business, shall, on reasonable oral or written request, permit the inspection of its facilities, services available for practice experience, student record, and such items pertaining to the Internship Program by the University, or agencies, or by both, charged with the responsibility for accreditation of the academic program.

4. RESPONSIBILITIES OF THE STUDENT

(a) The student is responsible for adhering to the administrative policies of the Business.

(b) The student is responsible for adhering to the proper dress code required by the Business.

(c) The student is responsible for procuring their own transportation to and from work.

(d) The student is responsible for reporting to the Business punctually and following all established regulations during the regularly scheduled operating hours of the Business.

(e) The student will not submit for publication any material relating to the internship experience without prior written approval of the Business.

(f) The student shall hold all privileged information concerning the operation of the Business or its customers in confidence.

5. TERMS OF AGREEMENT

This affiliation may be canceled by either party upon thirty days prior written notification.

This agreement may be revised or amended by the administrative officers of the two institutions with the approval of both parties. This document will be reviewed and revised as necessary.
6. **EMPLOYER ASSURANCE OF NON-DISCRIMINATION**

Assurance is hereby given that this employer’s facilities available for use in connection with The University of Louisiana at Lafayette Business Internship Program are not used in any manner that discriminates by race, color, creed, national origin, or sex.

IN WITNESS WHEREOF, the parties have executed this agreement on this the ____________ day of _____________________ 20______.

_____________________________
Employer (Supervisor) Signature

________________________________________
Director, B. I. Moody III College of Business Administration Internship Program
The University of Louisiana at Lafayette
THE UNIVERSITY OF LOUISIANA at LAFAYETTE
BUSINESS INTERNSHIP PROGRAM

Internship Learning Contract

This letter of agreement confirms the responsibilities of the Business, the Student Intern and the Faculty Advisor in the internship, the beginning and ending dates of the internship, and the due dates for the performance evaluations.

The size and function of the Business participating in the internship may, in some cases, require slight modifications of the procedures contained in this guideline. Significant modification of these procedures should be mutually approved in writing and signed by all of the parties signing the original agreement.

Beginning date of the internship: ___________________________________
* Please note: You may not begin an internship until the first day classes for any given semester.

Completion date of the internship: ________________________________
* Please note: You must complete an internship on or just before the semester ends.

How much will the intern be paid? ________________________________

Position: ______________________________________________________

Location of work assignment: ____________________________________

The Business is under no obligation to offer full-time employment to the Student Intern prior or after graduation. Likewise, the Student Intern is under no obligation to the Business after completion of the prescribed work period(s) for an Internship.

RESPONSIBILITIES

Student Intern: As the Student Intern enters the Business, he/she is expected to assume, as much as possible, the role of a regular staff member. The responsibilities include the following:

1. Adhering to company work hours, policies, procedures and rules governing professional staff behavior.

2. Adhering to company policies governing the observation of confidentiality and the handling of confidential information.

3. Assuming personal and professional responsibilities for his/her actions and activities.

4. Maintaining professional relationships with the company employees, customers, and so forth.

5. Utilizing a courteous, enthusiastic, open-minded, critical approach to policies and procedures within the profession.

6. Relating and applying knowledge acquired in the academic setting to the Business setting.
7. Developing self-awareness in regard to attitudes, values, behavior patterns, etc. that influence work.

8. Preparing for and utilizing conferences and other opportunities of learning afforded in the company.

9. Being consistent and punctual in the submission of all work assignments to the Supervisor and the Faculty Advisor.

10. Providing the Faculty Advisor with periodic progress reports.

**Employer:** It is the responsibility of the Employer to provide direct, on-the-job supervision of the Student Intern which includes the following:

1. Orienting the Student Intern to the company’s structure and operations.

2. Orienting the Student Intern to the company’s policies and procedures regarding appropriate professional and clerical staff.

3. Introducing the Student Intern to the appropriate professional and clerical staff.

4. Providing the Student Intern with adequate resources necessary to accomplish job objectives.

5. Orienting the Student Intern to the policies and procedures of the personnel department.

6. Affording the Student Intern the opportunity to identify with the Supervisor as a professional staff person by jointly participating in office interviews, meetings, conferences, projects, and other personnel and management functions.

7. Assigning and supervising the completion of tasks and responsibilities that are consistent with the Student Intern’s role in the company.

8. Consulting the Faculty Advisor in the event that the supervisor becomes aware of personal communication or other problems that are disrupting the Student Intern’s learning and performance.

9. Providing regularly scheduled supervisory conferences with the Student Intern.

10. Participating in joint and individual conferences with the Student Intern and Faculty Advisor regarding the Student Intern’s performance.

11. Submitting a final evaluation on the Student Intern’s job performance.

**Employer/Supervisor Signature**
Faculty Advisor: The Faculty Advisor assumes overall responsibility for consultation with the Business and Student Intern on objectives, agreement, and other job-related tasks. The Faculty Advisor is available to the Student Intern in an advisory capacity with respect to assisting him/her with the stated objective of the internship. The role of the Faculty Advisor involves the following:

1. Individual placement orientation and introduction of the Student Intern to the nature and purpose of the internship.

3. Consulting with the Business Supervisor and Student Intern regarding the Student Intern’s performance as needed.

4. Assuming responsibility for the removal of a Student Intern from the internship setting whenever necessary.

AGREED________________________________________ DATE ________________

Faculty Advisor Signature

AGREED________________________________________ DATE ________________

Director, Internship Program