

Academic Internship Agreement

To be completed by **Faculty Advisor** and **Student**

Student Name: _____ UNH ID: _____

Intended Internship Semester: ____ Fall ____ Spring ____ Summer ____ J Term Year: _____

Major: _____ Anticipated Degree Completion/Graduation Date: _____

Phone: _____ Email: _____

To be completed by Faculty Advisor:

Faculty Advisor: _____ Department: _____

UNH Phone Ext: _____ Email: _____

Internship Course Number: _____ CRN: _____

Credit Hours (check one):

☐ 4 Credits = 180 hours
 ☐ 4 Credits + class within major = _____ on site hours

☐ 3 Credits = 135 hours
 ☐ 2 Credits = 90 hours
 ☐ 1 Credit = 45 hours

☐ Other _____ Credits = _____ hour

Check one: ☐ Letter grade ☐ Pass/Fail

Faculty Advisor's Signature

Date

Student: This form serves as your permission to register for the internship course.

Meet with Internship & Career Planning Date _____ Time _____

☐ Identify positions of interest:

☐ Have your resume reviewed, approved and uploaded into Wildcat Careers

☐ Read and sign the **Internship Expectations Agreement**

I&CP Resume Approved - Signature

Date

To be completed by Site Supervisor

Internship Site (Name of Organization): _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Internship position title: _____ Department: _____

Site Supervisor: _____ Supervisor Title: _____

Phone: _____ Email: _____

Internship Start Date: _____ End Date: _____

Proposed work schedule/Hours per week: _____

Paid: ☐ No ☐ Yes \$ _____ hr \$ _____ stipend \$ _____ other

*I understand that I will be contacted mid-semester and at the end of the semester for student evaluation. Internship hours must be verified by **Site Supervisor**, and forwarded to the **Faculty Advisor**, prior to student receiving grade. Please initial: _____*

Faculty Advisor Email: _____

Outline Intern project/responsibilities (attach description if more space is needed):

To be completed by Intern and Site Supervisor together

Identify Intern's learning goals and how they will be accomplished (minimum of 3 goals recommended):
(attach goals if more space is needed):

Intern Signature

Date

Site Supervisor Signature

Date

Additional best practices for internship site supervisors will be sent via email by Internship & Career Planning upon completion of all paperwork.

Marketing Release – Site Supervisor:

UNH Manchester Marketing may be interested in writing a blog, conducting a photo session and/or video shoot in relationship to the student's internship experience for promotional purposes. I agree to be contacted by a member of UNH, during which time details regarding promotional purposes and release forms will be discussed. Please initial: _____

Final Project Prospectus

To be completed by **Intern** and **Faculty Advisor** together*

Describe below the final project required to complete the academic component of the internship. Be specific about the focus, sources, and plan of the project. The project will be submitted to the Faculty Advisor upon completion of the internship and is reviewed as a component of the grading process.

[illegible]

Student Signature

Date

Faculty Advisor Signature

Date

*COMP690 – Completed project will be assigned by your instructor

Students are required to submit completed Internship Agreement to Internship & Career Planning *prior* starting their internship. Copies of will be distributed to the Site Supervisor, Student and Faculty Advisor.

Originals will remain in Internship & Career Planning