



WILLIAM PEACE
UNIVERSITY
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William Peace University
15 East Peace Street, Raleigh, NC 27604
P: 919.508.2000 • F: 919.508.2326
www.peace.edu

Internship Learning Agreement

This Internship Learning Agreement (this “**Agreement**”) is to be completed electronically by the student participating in the academic internship (the “**Student**”), signed by the Student, the University Liaison and the Site Supervisor, and returned to the Office of Career Services. Executed copies of this Agreement are to be maintained by the Student, the University Liaison and the Site Supervisor.

Student name: _____	Email: _____	Student ID #: _____
Address during internship: _____		
City: _____	State: _____	Zip Code: _____
Telephone number during internship: _____		
Major 1: _____	Major 2: _____	Minor: _____
The internship is: paid _____ unpaid _____		
If the internship is paid, the pay rate is \$ _____ per hour		
Internship start date: _____	# of internship hours to be completed: _____	# of credit hours to be earned: _____

Faculty Instructor (or Faculty Advisor): _____ **Email:** _____ **Telephone:** _____

Course Number: _____ **Semester:** **Fall** _____ **Spring** _____ **Summer** _____

Internship Site: _____

Site Supervisor: _____ **Title:** _____ **Email:** _____ **Telephone:** _____

Site Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Learning Objectives <i>What I intend to learn</i>	Strategies <i>Job duties/responsibilities that coincide with my learning objectives</i>	Evaluation Methods <i>How my objectives will be measured</i>	Project <i>If applicable, describe final project/activity/paper- and evaluation method.</i>
1. 2. 3.	1. A) 1. B) 2. A) 2. B) 3. A) 3. B)	1. Career Services Supervisor Evaluation 2. Career Services Student Evaluation 3. Other: _____	

The student is responsible for:

1. completing this Agreement, with assistance from the University Liaison and Site Supervisor if necessary;
2. signing this completed Agreement and having it signed by the University Liaison and the Site Supervisor;
3. providing a fully executed copy of this Agreement to the University Liaison, the Site Supervisor, and the Office of Career Services;
4. maintaining a fully executed copy of this Agreement in the Student's records; and
5. communicating any changes to this Agreement to all of the parties named above.

This does not create a contract for a fixed term of employment.

Student Signature: _____

Date: _____

Faculty Instructor (or Faculty Advisor) Signature: _____

Date: _____

Site Supervisor Signature: _____

Date: _____