



**WILLIAM PEACE**  
UNIVERSITY  
*Your Success. Our Mission.*

**William Peace University**  
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## 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:** \_\_\_\_\_

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<b>Learning Objectives</b> <i>What I intend to learn</i>	<b>Strategies</b> <i>Job duties/responsibilities that coincide with my learning objectives</i>	<b>Evaluation Methods</b> <i>How my objectives will be measured</i>	<b>Project</b> <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:** \_\_\_\_\_