

Dallas County Community College District
INTERNSHIP/PRACTICUM/COOPERATIVE EDUCATION
Training Station Agreement

Program Information:

College _____ Course _____
Rating Period _____ Year _____ Today's Date _____
Major _____ Degree Plan Filed: Yes _____ No _____

Student Information:

Name _____ Home Phone _____
Email _____ Work Phone _____
Student ID/SS# _____ Job Title _____

Work Schedule					
Monday	Tuesday	Wednesday	Thursday	Friday	Add'l Hours

Sponsoring Firm _____

Evaluating Supervisor _____ **Email** _____
Title _____ **Phone** _____
Address _____ **City/Zip** _____

Training Agreement:

Three participants – student, supervisor and instructor/coordinator – in this Internship/Practicum/Cooperative Education venture will cooperate to determine the learning objectives toward which the student will work. Each semester a student enrolls in Internship/Practicum/Cooperative Education, it is necessary that new learning objectives be identified. Achievement of the objectives will be part of the basis for the credit and grade which will be earned for work experience. The instructor/coordinator will visit with the student and the evaluating supervisor on the job site each semester. The supervisor assists with the evaluation of the student performance. The instructor/coordinator determines the student's final grade. The student agrees to abide by the guidelines of the Internship/Practicum/Cooperative Education program.

Evaluating Supervisor _____ Date _____

Student _____ Date _____

Instructor/Coordinator _____ Date _____

Educational opportunities are offered by the Dallas County Community College District without regard to race, color, age, national origin, religion sex, or disability.
