



Academic Internship Learning Agreement

(Student is responsible for filling out and retrieving signatures. Once your final version is complete, make 3 copies. Retain 1 copy and provide copies to your faculty and site supervisor. Submit the original signed agreement to the Academic Internship Coordinator within the first 2 weeks of the start of the internship.)

Name: _____ Phone: _____ E-mail: _____

Starting Date: _____ Ending Date: _____ Hours per Week: _____

On-site Schedule (Day/s, Time/s): _____

<p>LEARNING OBJECTIVES (see the course objectives in your syllabus; discuss with site supervisor also)</p> <p>What do you hope to learn about the organization, social issues, and/or your professional field as related to your course?</p> <p>1. _____</p> <p>2. _____</p> <p>3. _____</p>

Student Agreement: In my internship commitment to the organization named below, I agree to:

- a) Attend an orientation or training, and serve my scheduled hours, as agreed upon with my site supervisor
- b) Contact my site if I am unable to make my normal scheduled hours
- c) Act in a professional manner, serving as a member of Loyola University Chicago and the community
- d) Complete all required paperwork and assignments related to this academic internship
- e) Notify my site supervisor if there are any problems I am having at my site
- f) Keep track of my hours and complete the required number of on-site hours for the course (minimum 100 hours)

Student Signature _____
Date

Site (organization/agency): _____

Site supervisor: _____ Title: _____

Phone: _____ E-mail: _____

Fax: _____ Best time to contact: _____

Job Description: (see attached)

Site Supervisor Agreement: As a community partner of Loyola University Chicago, I agree to:

- a) Work directly with the student and make explicit arrangements with the student concerning the expectations, hours, duties and overall goals
- b) Provide a good learning environment for the student presenting opportunities to contribute to the success of the organization
- c) Communicate periodically with the student about his or her performance
- d) Keep in contact with Loyola staff / faculty member and provide feedback on student performance
- e) Complete an evaluation of the student's performance and review with the student

Site Supervisor Signature _____
Date

Course: _____ Faculty Advisor/Instructor: _____

Faculty Agreement: As the faculty advisor/instructor for the course, I agree to:

- a) Provide guidance to help the student relate work experience to the student's major or academic program
- b) Provide reflection opportunities and assignments to allow the student critical reflection on community issues
- c) Communicate with the student regarding work on an on-going basis
- d) Keep in contact with Center for Experiential Learning staff to discuss any problems or issues

Faculty Signature _____
Date