



ASC 399 Internship Program LEARNING and SUPERVISOR CONTRACT

Student Information

Name:

Email:

Phone:

Student ID Number:

Course Information

Semester: Fall Spring Summer* Winter*

Year:

Credit hours:

1 credit hr = 48 contact hrs

2 credit hrs = 96 contact hrs

3 credit hrs = 144 contact hrs

Internship Site Information

Organization/Company Name:

Supervisor's Name:

Email:

Phone:

Full Address:

Contact Hours

Starting Date:

Ending Date:

Total Number of Weeks:

Average Hrs Per Week:

Total Hrs Worked:

Faculty Mentor/Instructor Information

Name:

Position:

Email:

Phone:

Details of Internship

Describe the duties of your internship:

List your learning objectives for this experience: *(What do you expect to learn from this experience? Objectives should be measurable and achievable and meet internship requirements.)*

Specify the assignments agreed upon with your faculty sponsor:

Refer to course syllabus for assignments based on number of credit hours

Specify dates and times you have agreed to meet with your faculty sponsor for critical reflection: *(Dates/times may be specific or in general terms.)*

Refer to course syllabus for due dates of assignments based on number of credit hour

Signatures

Internship Site Supervisor Signature:

I have discussed the internship described above with _____
(student's name). The expected hours and learning objectives are consistent with my
expectations and I agree to support this internship to the best of my ability.

Signature: _____ (Internship Site Supervisor)

Date: _____

Student Signature:

I, _____ (student's name) fully intend to fulfill
the hours and learning objectives laid out above. A failure to do so may result in failing for
this internship.

Signature: _____ (Student)

Date: _____

Faculty Mentor/Instructor Signature:

I, _____ (faculty mentor's name) agree that the internship above
fulfills the requirements for ASC 399.

Signature: _____ (Faculty Mentor/Instructor)

Date: _____

Animal Sciences Director of Undergraduate Studies

I, _____ (DUS's name) agree that the internship above fulfills the
requirements for ASC 399.

Signature: _____ (DUS)

Dates: _____