Liberal Arts and Sciences Internship – IDS4940

This form represents one step in a two-step application process. All steps must be completed by the application deadline: January 16th, 2018. The full internship course application process includes:

**Step 1. Application Form** [this form] – to be completed by you and your supervisor. Note that to qualify for credit, the internship **MUST** be for 150 hours over a period of no fewer than 10 weeks during the term. Scan the completed form and email the digital copy to the College of Liberal Arts and Sciences Academic Advising Office (Internship@advising.ufl.edu). If you cannot scan this document, submit the hardcopy to us at Farrior Hall or by fax to 352-392-2905.

**Step 2. Email Notification** – You will be notified via your GatorLink e-mail whether or not your internship position is approved to earn credit. If approved, IDS4940 will automatically be added to your schedule.

I. **STUDENT INFORMATION** - To be completed by the student

<table>
<thead>
<tr>
<th>Name</th>
<th>UFID</th>
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<tbody>
<tr>
<td>Email</td>
<td>Phone</td>
</tr>
<tr>
<td>Company Name &amp; Internship Title</td>
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<tr>
<td>Start Date</td>
<td>End Date</td>
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Select a Term:  
- ☐ Summer A  
- ☐ Summer B  
- ☐ Summer C  
- ☐ Fall  
- ☐ Spring

**Student’s Goals/Learning Objectives for the internship**: What do you intend to learn through this experience?

**Learning Activities**: Describe how your internship will enable you to meet your learning objectives. Include projects, research, report writing, meetings, etc., that will be a part of your internship, relating them to your learning objectives.
II. EMPLOYER LEARNING AGREEMENT - To be completed by the Internship Supervisor. Please print.

Supervisor’s Name __________________________________________________________________________________
Supervisor’s Phone _____________________ Email _______________________________________
Company/Organization _______________________________________ Department _____________________________
Address of Internship Location _____________________________________________________________
Internship Start Date ____________________ End Date _____________________ Hours Per Week _____________

The intern will work alongside me, the supervisor, in a space designated for the intern on my business premises where I will provide direct and daily supervision. Please initial to confirm: ____________

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<tr>
<th>Intern’s Responsibilities and Duties</th>
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<th>Supervision: Describe the supervision to be provided by your organization. What kind of orientation, instruction, consultation, feedback, assistance, and/or mentorship will the student receive?</th>
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</table>
III: AGREEMENT & CONSENT - To be signed by Internship Supervisor and Student.

**Internship Supervisor:** In signing below, I, the supervisor, verify the following:

- my organization is an established for-profit, nonprofit or governmental entity recognized as such within my professional community;
- my organization is bonded and/or holds sufficient business and liability insurance to cover students interning with my organization and on my business premise;
- my organization has a professional, informative website at which students can research my organization;
- my organization complies with the Department of Labor's Fair Labor Standards Act and my internship pays a fair wage, a legal stipend or meets each of the six criteria outlined by the Department of Labor for an unpaid internship [explore the FLSA criteria at http://1.usa.gov/9HJ8Eh];
- I will communicate with my interns using my organization's professional email address (no gmail, yahoo, etc.);
- I will provide my interns with direct and daily supervision and guidance in person and I will be accessible to my interns on a regular basis;
- I will provide work space for my intern with the necessary resources to complete the internship duties and course requirements;
- I will assign meaningful learning tasks/projects that are consistent with the internship description;
- I will complete student midterm and final evaluations as required by the internship course; and
- my interns will be working in a professional, established working environment (home-office sites and virtual/work from home or “in the field” internships are not eligible for this course).

**Supervisor signature:** ___________________________________________  Date: ____________________

**Student:** In signing below, I, the student intern, acknowledge and accept the following:

- I understand that The University of Florida has no control over any hazards to which I may be exposed during the internship and I do not hold the University liable for any accidents that may occur;
- I will adhere to all personnel rules, regulations, and other standard requirements of the host organization;
- I have appropriate computer and internet access at the site to complete all assignments;
- I agree with all components of the Learning Agreements and agree to carry out the objectives, strategies and methods of the agreement promptly and to the best of my ability;
- I authorize The University to confirm my course enrollment status with my internship supervisor;
- I understand and agree to the grading policy for this course, and I understand that it is my responsibility to track the progress of my grades during the course;
- I have read the syllabus and understand that within the specified date range: I must complete the internship; I must complete the agreed upon weekly hours; and I must properly complete the course assignments to pass this course; and
- I understand that if I fail to adhere to this agreement, I will not receive a passing grade or the corresponding academic credit for this course.

**Student signature:** ________________________________________________  Date: ____________________

**COURSE CONTACT INFORMATION**
College of Liberal Arts and Sciences, University of Florida
Farrior Hall|100 Fletcher Drive, Gainesville, FL 32611
352.392.1521|Internship@advising.ufl.edu| https://www.advising.ufl.edu/lsinternship