

COB Internship Learning Agreement

This learning agreement must be completed by the student and sponsor's site-supervisor and approved by the appropriate Department Chairperson and Faculty Supervisor before the student will be eligible to register for the student internship course.

Department and Course Number: _____ Credit Hours: 1 2 3

Internship Year: _____ Term: _____

Internship Name/Title: _____

Student Information

Last Name: _____ First: _____ MI: _____

UCA Student ID: _____

Street Address: _____

City: _____ State: _____ Zip code: _____

Local Phone: _____ Cellular Phone: _____

Preferred Email Address: _____

Sponsor Information

Organizational Name: _____

Organizational Address: _____

City: _____ State: _____ Zip code: _____

Local Phone: _____ Cellular Phone: _____

Preferred Email Address: _____

Last Name: _____ First: _____ MI: _____

Title: _____

Phone: _____ Fax: _____ Email: _____

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COB Learning Agreement: Internship Job Description (Completed by Sponsor)

Please write or attach a separate piece of paper with the following information: Internship job responsibilities, tasks & learning opportunities for the student. Be as specific as possible. Please indicate if you attach a separate piece of paper in the space below.

I have discussed this internship with the student and have assigned the responsibilities and tasks that appear in this job description, which is part of the learning agreement. I agree to provide assistance and necessary training and consultation to help the intern make progress toward their learning goals and objectives. I further agree to provide the intern with an orientation concerning relevant organizational policies, procedures and functions, to meet with the intern regularly and to be available for counsel and advice for the duration of the internship. I agree to conduct an evaluation of the student by completing the COB Supervisor Midterm and Final Evaluation Forms and to participate in a site visitation if requested. I also agree to review the student's COB Weekly Journal and forward the journal entries to the appropriate Department Chairperson/Faculty Supervisor weekly as part of the evaluation process.

Supervisor Signature _____ Date _____

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This Learning Agreement includes statements of learning objectives (goals), specific strategies for accomplishing these goals, methods of evaluating goal accomplishment and a description of the closing activity for each goal (the deliverables). Goals are normally broader statements, while strategies describe very specific activities, projects, and/or tasks. It is important that goals, strategies and evaluation methods be realistic, appropriate, meaningful, and measurable.

The descriptions of learning objectives, strategies, evaluation methods and closing activities provided below are written from an intern's perspective. These details of the Learning Agreement are, however, developed and agreed to jointly by the Intern, site supervisor and Department Chairperson/Faculty Advisor. It represents the heart of the three-way agreement that is integral to the internship. This is the intern's opportunity to declare what they want to learn, how they intend to pursue it, and how they will know when they've done it. It is the site supervisor and Faculty Advisor's opportunity to document how the intern will meet their expectations. It forms the basis for academic and work assignments from which the Intern will learn. It justifies getting academic credit for an internship, so it should be academically challenging. The Learning Contract should be fully developed and agreed to before the internship start date.

Learning Objectives: Internship goals or objectives usually describe what you (the Intern) intend to learn during the course of the Internship. Be specific and bold. Do you want to improve or develop skills, expand knowledge of a specific field or topic, apply or test a particular body of knowledge? Are you interested in validating a career interest and your own suitability for that career? Set specific goals focused on knowledge, skills and abilities, personal/professional development, and career exploration. Add other categories you feel are relevant. Include objectives that will stretch your thinking, such as: "Learn more about how Operations Management fits into/supports the organization's overall strategic operations", "Become more familiar with the role of Public Accountants and what it's like to be part of a Public Accounting firm", "Identify, apply and evaluate specific leadership and management tools/techniques in interpersonal experiences", "Apply problem recognition, definition, and resolution skills that will improve my critical thinking/analysis skills", etc.

Strategies: Describe specific actions, processes, and work assignments that will allow you to achieve each objective. Will you attend training sessions about the subject? Will you perform specific tasks to accomplish a specific project related to one or more of them? Will you read supplemental books, articles, and/or other materials that relate to them? Will you do a general industry and company-specific analysis? Do you plan to interview professionals in the field?

Evaluation Methods: Describe how your progress regarding each objective will be measured. How will you know, and show others, that you have achieved your learning objectives? Will you keep a journal? Will you compile records of your activities or the outcomes of your activities throughout the internship (e.g. reports on activities performed, summaries of statistics collected and analyzed, tests from training sessions, other people's comments on your approach to work and/or your achievement of agreed-to-objectives). Will the project you're working on be implemented or incorporated into something larger?

Closing Activity: Describe your final activities/projects for each objective. What is/are the "deliverables" (e.g. final reports, project briefings, project implementations, etc.)? Who receives them? What is the site supervisor's expectation? What does the Department Chairperson/Faculty Advisor expect? What "legacy" do you want to create? Will you brief the individuals at the site, instructors, Department Chairperson, Faculty Advisor, relevant classes? Will you need to turn over a work-in-progress to someone else?

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Learning Agreement: Internship Academic Component

The academic component is to be completed by the student, the sponsor's supervisor, and the Faculty Advisor and approved by the appropriate Department Chair. One or more learning objectives must be identified in each of the following three categories with specific strategies, evaluation methods, and closing activities for each learning objective identified.

Academic Learning & Application – related to the student's field of study

Learning Objective (What the student intends to learn)

Strategy (What the student will do/how the student will learn)

Evaluation Method (How the student will know when the learning objective is achieved)

Closing Activity (How the student will document completion)

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Skill Development – skills specific to your specific major and/or general skills

Learning Objective (What the student intends to learn)

Strategy (What the student will do/how the student will learn)

Evaluation Method (How the student will know when the learning objective is achieved)

Closing Activity (How the student will document completion)

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Personal Development – clarification of workplace values, career awareness and professional development

Learning Objective (What the student intends to learn)

Strategy (What the student will do/how the student will learn)

Evaluation Method (How the student will know when the learning objective is achieved)

Closing Activity (How the student will document completion)

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Department Chairperson/Faculty Advisor: I have discussed this internship with the student and approved the academic components which appear in this agreement. I concur with the stipulations of this agreement as of the date of my signature. I further agree to the student progress during the internship experience, to conduct a final assessment/evaluation and to do an onsite visit deemed appropriate.

Department Chairperson/Faculty Supervisor Signature: _____
Date: _____

Department Chair Signature: _____
Date: _____

Student: I accept the academic and work assignments indicated in this CBA Internship Learning Agreement. I agree to complete all work and academic-related assignments, including but not limited to a Weekly Journal, Student Self Evaluation Form, and an end-of-term Summary Paper (minimum of five pages), in a timely fashion and to the best of my ability. I accept the obligation of my confidentiality in my work and agree to adhere to the sponsor's relevant policies and procedures, and to the appropriate standards of ethical conduct. Further, I understand there are ordinary risks inherent in the workplace and I will become aware of and consent to take such risks. I also understand that the University of Central Arkansas has no control over any hazards to which I may be exposed during the internship and do not hold UCA liable for any accidents or incidents that may occur. I realize that I must sign a Student Waiver before being able to register for this course.

Student Signature: _____ Date: _____

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UNIVERSITY OF CENTRAL ARKANSAS
STUDENT INTERNSHIP WAIVER

This is a release. Please read carefully and understand the details before signing. Students must submit this completed form before registering for credit.

Student's Name: _____

Student ID #: _____

Internship Period: _____

Agency/Organization: _____

Address: _____

City _____, State _____ Zip _____

I. Overview

The University of Central Arkansas (UCA) does not control the way in which the internship work experience and the internship site is structured or operates. In granting academic credit for this internship, UCA affirms that the experience is an appropriate curricular option for UCA students and worthy of credit. UCA makes no other assurance, express or implied, about any travel and/or living arrangements the student has made. UCA does not knowingly approve internship opportunities that pose undue risks to participants. However, any internship or travel carries with it potential hazards which are beyond the control of UCA and its agents or employees, and I assume the responsibility of any and all such risks.

II. My Relationship with the Sponsor

I acknowledge and understand this internship is for educational purposes only. It is not employment, nor is it an offer of employment. I understand that the Sponsor is not required to provide monetary compensation for any of my work, and that I will not be eligible for unemployment compensation upon termination.

UCA prohibits discrimination on the basis of gender, race, color, age, national origin, religion, or disability, and UCA requires the sponsor to affirm that the Sponsor also prohibits any and all discrimination.

III. My Personal Conduct

I understand and agree to conform my conduct to professional standards of the internship site. I further understand that it is important to the success of the present internship and the continuance of future internships that interns observe standards of conduct that would not compromise UCA in the eyes of the individuals and organizations with which it has dealings. I acknowledge that I have reviewed all relevant provisions of the UCA Student Handbook governing such off-campus conduct, and I acknowledge having

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received copies of any such written policies, and having been made aware of any other policies. I agree that should the persons at UCA responsible for this internship program decide that I must be terminated from my internship because of conduct that might bring the program into disrepute, or the internship into jeopardy, that decision will be final (subject to such review as may be required by the UCA Student Handbook) and may result in loss of academic credit for the internship.

IV. Insurance Coverage

I understand that UCA does not have an obligation to provide me with any type of insurance coverage. I state that I have sufficient health, accident, disability, and hospitalization insurance to cover me during my internship. I further understand that I am responsible for the costs of such insurance and for the expenses not covered by this insurance. I understand that if I use my personal vehicle for the benefit of the organization/agency with whom I perform my internship that UCA has no liability for personal injury or property damage, which may result from that use. I agree to rely solely on my personal vehicle insurance coverage and on any insurance coverage provided by my internship organization/agency.

I also understand that UCA assumes no liability for personal injury that I may suffer in the course of my internship and I agree to be responsible for ascertaining whether the organization/agency sponsoring my internship provides worker compensation coverage for me.

V. Release

I understand, acknowledge and agree that the internship site and its use of any facilities shall be undertaken by me at my sole risk. For myself, my heirs, personal representatives and any others claiming by or through me, I hereby forever waive and release and hold UCA, and its Board of Trustees, officers and employees harmless from and against any and all claims, demands, injuries, damages, actions, or causes of action, whatsoever to me or to my property arising out of or connected with the internship and with the use of any and all services of facilities associated with the internship, whether or not sponsored by UCA. I hereby forever release, discharge, and covenant not to sue UCA, its Board of Trustees, employees, or agents as to any and all liability that may arise out of any injury or harm to me, death, or property damage resulting from my participation in this internship.

VI. Miscellaneous

I understand that UCA reserves the right to make cancellations, changes, or substitutions in cases of emergency or changed conditions or in the general interest of the internship program.

I grant permission to UCA to release any and all Faculty Member Recommendation for a Student Internship forms to a sponsor if the sponsor so requests.

I attest that I am over the age of 18 and may legally be employed in the United States of America.

I represent and warrant that I have disclosed all relevant, pertinent information that could affect my ability to successfully complete the internship.

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