

AS Sustainability Fund Internship Agreement Form

If funds are being requested for a paid internship, this form and a page describing the Internship Learning Objectives must be completed and submitted with your Project Proposal

Project Director (student's name): _____

Department through which the internship will be run: _____

Faculty Advisor's name: _____

Faculty Advisor's department: _____

Faculty Advisor's office (building/room number): _____

Faculty Advisor's phone #: _____

Faculty Advisor's email: _____

Amount of funding being requested for the internship: _____

Internship Learning Objectives

The following questions must be answered on a separate sheet of paper.

1. Generally describe the proposed internship, the learning objectives of the internship, and the way you plan to achieve those learning objectives.
(What is the purpose of the internship? Why are you interested in the internship? What are the learning objectives and how are you going to achieve them? Note: These learning objectives should be measurable, form the basis for your internship, and be set by or in conjunction with your faculty advisor.)
2. Will you receive units in addition to possible funds?
(If so, how many? Are they part of your graduation requirements?)
3. How many hours per week do you plan to work?
(Will your department pay you hourly or give you a set stipend? What is the duration of your internship (length of time)?)

Student Name (Print) _____

Signature: _____

By signing this form, I, the student, acknowledge that I understand the following: that I am receiving internship credit and payment for my internship from the department named above; that I need to follow any additional requirements that my department requires; that I am not an AS employee; that the AS is not responsible for overseeing my internship nor is the AS responsible for anything that happens during the course of my internship.

Name of Faculty Advisor (Print): _____

Signature: _____

By signing this form, I, the Faculty Advisor, acknowledge the following: that I am overseeing the student named above as the Project Director, who has applied for this internship; that this internship is not being overseen by the AS; that the AS is not responsible for the student, proposed project, or proposed internship; and that I need to discuss the terms of the internship with my Department Chair and the student (Project Director) who wishes to complete the internship.

Chair or Director of Sponsoring Department (Print Name): _____

Signature: _____

By signing this form, I acknowledge that I understand the following: that the AS is not responsible for this internship, the student, or the Faculty Advisor; that I am responsible for funding the internship in accordance with the policies and procedures of my department and/or college, and that I am responsible for sending an invoice for the total amount to the AS for reimbursement (up to the amount allocated by the Committee); that the Faculty Advisor for this proposed project is a faculty member from my department; and that the student (Project Director) who is proposing this project is enrolled in my department. I will follow up with both the student (Project Director) and the Faculty Advisor about any additional requirements or information I need to conduct an internship through my department.