INTERNSHIP ENROLLMENT APPLICATION & SUPERVISOR AGREEMENT

Department of Spanish & Portuguese

Student Information						
Student Name			Academic A	Advisor		
OSU Email			Advisor Em	ail		
Language		Course Requir	ourse Requirement			
Term		•	Year			
To be filled out by the Internship Supervisor: Internship Site Info & Supervisor Agreement						
Field or Primary Area of Focus		S				
Organization Name						
Supervisor Name and Title						
Supervisor's Address						
City		State			Zip	
Supervisor's Phone			Email			
Position Information, Learning Objectives, & Activities to Accomplish Objectives						
Position Title						
Describe the						
intern's duties &						
responsibilities, a	as					
well as skill						
development and						
hands-on learnin	ıg.					
I will be able to verify weekly hours worked and evaluate and provide feedback regarding this student's						
internship performance at the mid-point and end of the internship.						
Average weekly		Total hours of in			Volunteer □	
hours of internsh	iip:	(1 cr = 2-3hrs w)	/k x 15 wks)		Paid □	

All parties agree to conform with this agreement and provide 2 weeks' notice to all parties before termination of said agreement.

End (M/D/YYYY):

Submit this completed internship enrollment application via the webform by the posted deadline.

Dates of Internship: Start (M/D/YYYY):

The Undergraduate/Graduate Studies Committee will not consider incomplete or late submissions. You will be contacted via email of the approval/denial.

If approved, all signatures will be obtained through OSU's official e-signature service, DocuSign, in the following order: Academic Advisor(s) > Internship Supervisor > Student Intern.

All signatures must be completed by the 1st Friday of the semester of the internship to appropriately meet OSU course enrollment deadlines.

Termination or modification of the internship agreement may adversely affect the student's grade, credits awarded and/or semester financial responsibility.