INTERNSHIP CONTRACT

MGMT495/ACCT 495

Student Name: ___________________________  B#____________________

Student Email: __________________________

Sponsoring Agency: ________________________  Internship Supervisor: ________________________

Agency Address: ________________________________________________________________

Supervisor Email: ___________________________  Supervisor Phone#: ________________________

Semester: _____________  Year: ___________  Grade Option is P/F only

- Cr. Hrs. Requested: ______  (1 cr. = 45 hours, 2 cr. = 90 hours, 3 cr. = 135 hours, 4 cr. = 180 hours)
- Will this internship exceed the max of 8 credits of internship, independent study and TA combined? ______ Yes ______ No
  IF YES, THE CREDITS CANNOT BE USED TOWARDS YOUR DEGREE
- You are required to have the 311 core course complete before you can take an internship (ie. If you are doing a marketing internship, you must have MKTG311 complete).
  Have you completed your 311 course? ______ Yes ______ No
- Is this a paid internship? ______ Yes ______ No
- Have you ever been convicted of a felony or been convicted of a felony but evaluated and approved through the campus process? ______ Yes ______ No
- Have you ever been convicted of a felony but not reviewed and approved through the campus process? ______ Yes ______ No

TO BE FILLED OUT WITH SUPERVISOR:
LEARNING OBJECTIVES (please explain what you hope to learn from this internship):

METHODS TO ACHIEVE OBJECTIVES (describe duties which will facilitate the learning noted above):

EVALUATION:
Grading is mandatory P/F, based upon an acceptable evaluation by the internship supervisor and submission of the annotated bibliography of journal articles, summary report, weekly journal, and an internship evaluation form (to be provided) as noted on the syllabus for MGMT/ACCT 495 which will be posted to MyCourses.

You are liable for tuition charges and you must add, change, or drop this course within the legal dates as stated in the Schedule of Classes

Student Signature: ___________________________  Date__________

School of Management Approval: ___________________________  Date__________
SCHOOL OF MANAGEMENT

VARIABLE CREDIT COURSE WORK REGISTRATION FORM

This form must be used to register for any variable credit courses, which includes: INDEPENDENT STUDY, INTERNSHIP, TEACHING PRACTICUM, or DISSERTATION. Variable credit courses are identified in the Schedule of Classes and are numbered 491, 495, 497, 555, 597, 698, 699 and 700 (continuous registration). Internship and Independent Study registrations also require a separate contract/agreement form. It is the student's responsibility to secure all information and signatures required. If any portion of this form is left unfulfilled, it will be returned to you and you will not be registered in the system for this course. You are liable for tuition charges and you must add, change, or drop this course within the legal dates as stated in the Schedule of Classes. If you are taking two or more of the same courses (e.g., two MGMT 597’s), please note this in the appropriate space on this form. Return the completed form to the School of Management Advising Office.

STUDENT B NUMBER

STUDENT NAME ___________________________ DATE __________

MAJOR ________________________________

Course and Number:

_____ ACCT495 (Internship)  _____ ACCT497 (Independent Study)  _____ MGMT491 (TA)  _____ MGMT495 (Internship)  _____ MGMT497 (Independent Study)

Credit Hours Requested (For Internship: 1 cr. = 45 hours, 2 cr. = 90 hours, 3 cr. = 135 hours, 4 cr. = 180 hours) (For TA: 1-2 credit hours only)

_____ 1cr.  _____ 2cr.  _____ 3cr.  _____ 4cr.  |

Semester and Year: ____________________________ (semester) ____________________________ (year)

TITLE OF COURSE

(for internship and independent study only. TA’s do not need to put a title here)
The title you fill out below is the title that will appear on your official transcript (for example: Accounting Internship, Finance Internship, etc.) Limit of 30 characters. Abbreviate as necessary

TA Only

Instructor __________________________

Signature of Instructor (TA only) __________________________ Date __________

Office Use Only

SOM Approval ______________________ Instructors section code: ________

_____ 2nd variable credit course with the same course name and number