Internship Agreement

Department of Instructional Technology & Learning Sciences  Utah State University

The following is an agreement between the Internship Organization (Placement), the Department of Instructional Technology & Learning Sciences (Department), and the Intern. The agreement should be completed and filed with your Chairperson before the internship begins. After signing, any changes made to this agreement should be negotiated with all accountable parties with an addendum filed with the Chairperson.

Agreement of cooperation between the Department,

______________________________  ______________________________
Placement (Please Print)        Intern (Please Print)

The Placement should:

1. Provide the Intern with an orientation to agency policies and procedures and inform Interns of changes in a timely manner.
2. Provide the Intern with access to offices, equipment, and work space appropriate to their position.
3. Treat Interns as employees of the agency with all the rights and responsibilities within the agency's power.
4. Employ the Intern between the dates of ___________________ and ___________________ for an average of hours __________ per week  (Note: total hours must meet the 50 hours of work minimum per 1 USU credit requirement).
5. Offer the Intern the following salary: ___________________
6. Assign a person to supervise the Intern, and provide the Department and Intern with up-to-date contact information for this person.
7. Notify the Department and Intern of difficulties or necessary changes as soon as possible.
8. Formally evaluate the Intern both midway and at the termination of the internship.
9. Provide ongoing feedback about the internship program.
10. Ensure that the Intern's duties are in accordance with the AECT code of ethics.

The Department should:

1. Provide a faculty member to act as a liaison between the Intern and the Placement, and provide the Supervisor and Intern with up-to-date contact information for this person.
2. Facilitate the confidential handling of communications between the Instructional Technology & Learning Sciences Department, the Intern, and the Placement.
3. Monitor Intern's progress throughout the internship.
4. Notify the Placement and Intern of difficulties or necessary changes as soon as possible.
5. Take responsibility for assigning the Intern a grade.
The Intern should:

1. Follow the policies and procedures of the Placement.
2. Follow the policies and procedures of the Department.
3. Follow the AECT code of ethics.
4. Act as an employee of the Placement, including attending all requested staff meetings and supervision.
5. Formally evaluate 1) the Placement, 2) the Placement supervisor, and 3) the ITLS Department's internship program.
6. Notify the Placement and the Department of difficulties or necessary changes as soon as possible.

Please attach any additional comments and conditions specific to this contract.

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<th>Placement Representative Signature</th>
<th>Print Name</th>
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<th>Intern Signature</th>
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<th>Chairperson Signature</th>
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# Contact Information

## Placement Representative

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<tr>
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## Intern

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## Committee Chair

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Internship Time Line Checklist

1. Select Committee Chairperson
2. Complete Program of Study (Program of Study for Master's Degree)
3. Find Internship
4. Formalize Internship (Internship Agreement and Proposal)
5. Submit 1st Internship Journal (50 hrs. Completed)
6. Midway Formal Evaluations, (submit 2nd Internship Journal, 100 hrs. completed & Internship Evaluation Forms)
7. Submit 3rd Internship Journal (150 hrs. completed)
8. End Evaluations, (Internship Evaluation Forms)
9. Submit Internship Report to Chairperson for approval
10. File Internship Report with Department
Internship Evaluation
Section A

Section A is to be completed by the Placement Supervisor.

RE: __________________________ Number of hours completed: ________________

(Name of Intern)

Please evaluate the intern by providing brief comments and/or recommendations for the following items (Reverse side may be used if additional space is necessary).

1. The Intern's performance as an employee of your organization (adherence to policies and procedures, ethical practice, etc.):

   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________

2. The intern's performance on their assigned work:

   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________

Please check the description below that best describes the Intern's overall performance/progress.

   _____ Excellent    _____ Satisfactory    _____ Unsatisfactory-Contact me

3. Additional comments, recommendations, or concerns:

   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________

Placement Supervisor signature: __________________________ Date: __________________

Updated 1 October 2014
Internship Evaluation
Section B

Section B is to be completed by the Intern.

RE: ____________________________ . ____________________________

(Name of Intern) (Name of Placement)

Number of hours completed: ______________

Please evaluate the internship by briefly responding to the following items (Reverse side may be used if additional space is necessary).

1. What is your view of the Placement and your place within it? (Are you respected as an employee of the company? etc.) __________________________________________________________________________________________
   __________________________________________________________________________________________
   __________________________________________________________________________________________
   __________________________________________________________________________________________
   __________________________________________________________________________________________

2. Evaluate your Placement Supervisor (Do they provide constructive/helpful feedback and support for your work? Are they available?, etc.) __________________________________________________________________________________________
   __________________________________________________________________________________________
   __________________________________________________________________________________________
   __________________________________________________________________________________________
   __________________________________________________________________________________________

3. Evaluate your assigned work load (Are the Placement's expectations appropriate? etc.) _________
   __________________________________________________________________________________________
   __________________________________________________________________________________________
   __________________________________________________________________________________________
   __________________________________________________________________________________________
4. Is the internship fulfilling your objectives and expectations? Have your objectives and expectations changed since beginning the internship? If so, how? ________________________________

______________________________________

______________________________________

______________________________________

5. Evaluate your own performance as an intern. ________________________________

______________________________________

______________________________________

______________________________________

6. Evaluate your progress as an instructional designer. ________________________________

______________________________________

______________________________________

______________________________________

Intern signature: ________________________________ Date: ________________________________
**Intern Evaluation Form**  
Section C

Section C is to be completed by the Chairperson

RE: ____________________________  
(Name of Intern)  
(Name of Placement)

Number of hours completed: ______________

*Please make an overall evaluation of the Intern based on the following information:*

- Section A of the Internship Evaluation (submitted by the Placement)
- Section B of the Internship Evaluation (submitted by the Intern)
- Quarterly journal evaluations (submitted by the Intern)
- Any correspondence regarding the internship
- Your personal familiarity with the company, the intern, etc.

*When finished, give the completed evaluations to the Department Secretary for filing.*

Overall Evaluation: __________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________

Please check the description below that best describes the Intern's overall performance/progress.

- [ ] Excellent  
- [ ] Satisfactory  
- [ ] Unsatisfactory

Additional Comments/Recommendations (if any, should be discussed with the Intern): __________
________________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________

Chairperson Signature: ____________________________  
Date: ______________