



COLLEGE OF COMPUTING, ENGINEERING, AND CONSTRUCTION
ENGINEERING ACADEMIC INTERNSHIP AGREEMENT

Practicum Student's Name _____ Major: _____

Student's Address _____
 (Street/P.O. Box) (City) (State)

Student's Phone Number _____ E-mail _____

Student's N-Number _____

Employer _____ Phone Number _____

Employer's Address _____
 (Street/P.O. Box) (City) (State) (Zip)

Supervisor's Name _____ Title _____

Supervisor's Contact Information

Phone _____

Fax _____

E-mail _____

Practicum Starting Date _____ Ending Date _____

Student's Rate of Compensation _____ Hours to be worked per week _____

Brief Description of the cooperative education assignment (detailing learning objectives and responsibilities): _____

RESPONSIBILITIES OF THE STUDENT

1. The student is required to complete a minimum of 225 (1 Credit) - 450 hours (2 Credits), 15 weeks * 15-30 hours of work in an approved position, plus any other requirements specified by the course syllabus and/or the Academic Internship Manual.
2. The student's rate of compensation is to be negotiated between the Employer and the student.
3. A grade will be assigned that is contingent upon a "satisfactory" evaluation by the Supervisor, as well as completion of all other requirements specified by the course syllabus and/or the Co-op/Internship Manual.
4. Each Practicum student will maintain regular contact with the Career Services Advisor. The Academic Internship student is also required to present an initial list of their personal objectives for the co-op/internship (developed in coordination with the Practicum Supervisor) and submit a final summary report on their work experience.

5. The student is subject to the jurisdiction of all rules, regulations, and codes of conduct affecting students at University of North Florida, as well as those that the employer may require.
6. The student must maintain confidentiality with regard to sensitive business information gained in the work environment.

RESPONSIBILITIES OF CAREER DEVELOPMENT:

1. Provide the student and Supervisor with a pre-internship orientation, maintain regular interactions with both parties to assure that the learning objectives are being achieved, and conduct the final evaluation of the internship based on input from the intern supervisor and reports submitted by the Intern.
2. Provide the participating employer/supervisor with appropriate instruments for evaluating the student.
3. Assist the student in terms of the final report to be submitted on the co-op/internship experience.

RESPONSIBILITIES OF THE PARTICIPATING EMPLOYER AND SUPERVISOR

1. The Employer should assign a specific Supervisor to work directly with the student to help achieve the educational objectives of the co-op/internship by assigning appropriate work duties.
2. The Supervisor and the student will create a list of specific objectives and assessment criteria for the internship that will form the basis for evaluating “satisfactory completion” of the internship.
3. Provide the student with an orientation to the work-site duties, hours, and employer/supervisor expectations.
4. Schedule regular meetings with the student and provide ongoing feedback about the student’s performance.
5. Provide a safe and secure workplace at which the student has the opportunity to meet his/her educational objectives.
6. At the completion of the co-op agreement, the Supervisor will evaluate the student’s work performance. The Supervisor will complete the “Confidential Evaluation Form” (provided by the Career Services Advisor) and will provide brief comments on the positive and negative aspects of the Student’s performance. The evaluation form should be submitted within ten (10) days of the completion of the co-op/internship.

*This agreement is subject to any specified educational objectives, duties, learning outcomes, and evaluation methods that may accompany this agreement or are included in the Co-op/ Internship Manual. ***ONCE ALL OF THE APPROVED SIGNATURES ARE COMPLETED, YOU MUST REGISTER FOR THE CLASS IN ORDER TO GET CREDIT!*****

_____	_____
(Student)	(Date)
_____	_____
(Supervisor/Employer)	(Date)
_____	_____
(Academic Advisor)	(Date)
_____	_____
(Department Chair)	(Date)
_____	_____
(International Center if applicable)	(Date)
_____	_____
(CCEC Career Development Director)	(Date)