INTERNSHIP JOB DESCRIPTION FORM

STUDENT SECTION

Name (Last, First, Middle):



INTERNSHIP GOALS/LEARNING OUTCOMES

You must develop a minimum of three goals/learning outcomes that must be approved by your Internship Supervisor and Internship Instructor of Record. You may submit additional documents as needed.

GOAL/LEARNING OUTCOME # 1 Include your rationale, objective and measurable evidence (How will you know when you have met your goal?):

GOAL/LEARNING OUTCOME # 2 Include your rationale, objective and measurable evidence (How will you know when you have met your goal?):

GOAL/LEARNING OUTCOME # 3 Include your rationale, objective and measurable evidence (How will you know when you have met your goal?):

INTERNSHIP INSTRUCTOR OF RECORD SECTION

Inte	rnship Course Name: Internship Course Number:
Please review the eligibility of the internship site and job description to ensure this is a credit-worthy experience. Then check the appropriate response to the questions below:	
	I have evaluated and approve this organization and job description as an eriential learning experience worthy of academic credit. 🔲 YES 🗌 NO
2.	The learning outcomes and goals align with the internship course. 🛛 YES 🗌 NO
3.	The student is completing the internship during the reported time frame. 🛛 YES 🗌 NO
4.	The student's participation in the internship course will count as an elective. 🔲 YES 🗌 NO
5.	Additional materials will be provided by the Academic Department. 🔲 YES 🗌 NO
	To receive academic credit, the student must complete an extra project.
	This internship has been approved by the Internship Course Instructor of Record.
Inst	ructor of Record Signature: Date: