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| **Student Name:** | **Student Email:**  |
| **Student Phone #:** |
| **Organization Name:** | **Organization Address:** |
| **Supervisor Name and Title:** |
| **Supervisor Phone #:**  | **Supervisor Email Address:**  |

**Internship responsibilities and duties will include:**

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| *Feel free to attach or include a formal position description if one exists.* |

**Describe how the student will meet these responsibilities remotely (i.e. list agreed upon work hours and proposed meeting and mentoring schedule via zoom or other remote communication methods):**

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**Provide details on additional requirements or concerns, if applicable:**

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**By signing your (supervisor) name below, you certify that:**

1. The student listed above will work as an intern at your organization for at least 100 hours.
2. The student’s tasks will involve deliberate learning and professional development related to their area of study.
3. The student will receive thoughtful and regular guidance, feedback and mentoring.
4. The student listed above will adhere to social distancing principles (working remotely, not gathering in groups, etc.) while completing their 100 internship hours during the fall 2020 semester.

**By signing your (student) name below, you certify that you will:**

1. Maintain a professional attitude, appearance, and work ethic, and demonstrate punctuality and dependability.
2. Communicate deadlines and obtain approvals from the supervisor regarding all mandatory JOUR 498 paperwork.
3. Log all hours at the internship and complete the total number of agreed upon hours during the semester.
4. Maintain social distancing principles (working remotely, not gathering in groups) for the duration of the internship.

**Supervisor Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_**

**Student Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_**