

STUDENT LEARNING CONTRACT DIRECTIONS & REGISTRATION

Susquehanna University, Office of the Registrar, 514 University Avenue, Selinsgrove, PA 17870-1001
Telephone: 570-372- 4110 • Fax: 570-372- 2753 • Website: <http://www.susqu.edu/registrar/>

The student learning contract is completed in sequential order. The student and the employer must determine the student's duties and assignments before a faculty intern advisor will be able to determine academic assignments and credit hours.

Students are responsible for obtaining all necessary signatures and having all relevant sections of this form completed before submitting the form directly to the Office of the Registrar.

Step 1: Sections to be completed by the student

Complete section A and sign section D. Obtain complete information for sections B through D and submit the form directly to the Office of the Registrar.

Step 2: Sections to be completed by the employer

Read section A. Determine whether the student's goals and objectives may be met through an internship with your organization. If you are able to provide a sufficient internship experience for the student, complete section B and provide your signature in section D for approval.

Step 3: Sections to be completed by the faculty intern advisor

Read sections A and B. Review the student's goals and objectives in addition to the employer's description of duties to determine academic learning assignments. Complete section C and provide your signature in section D for approval.

Step 4: Sections to be completed by the department head (School of Arts and Sciences) or the chair of the Sigmund Weis School of Business Internship Committee (SWSB)

Review sections A through D. Provide your signature in section D for approval.

Step 5:

The student submits the student learning contract directly to the Office of the Registrar. The internship is then placed on the student's course schedule.

Step 6:

The student, employer, faculty intern advisor, and department head each receive a copy of the student learning contract within one week of the student's submission of the completed contract as confirmation that the internship has been approved and registered with the university. Any discrepancies in the student learning contract must be reported to the department head immediately.

Along with a copy of the student learning contract, the employer will receive a confirmation letter and employer evaluation form generated by the Office of the Registrar. The employer will be instructed to send the employer evaluation form directly to the faculty intern advisor at the end of the internship.

Step 7:

Copies of the student learning contract will be sent to the Office of University Communications for press releases and the Career Development Center for employer development.

SUSQUEHANNA UNIVERSITY
Internship Student Learning Contract

Students are responsible for obtaining all necessary signatures and having all relevant sections of this form completed before submitting the form directly to the Office of the Registrar (SAS) or the chair of the SWSB Internship Committee (SWSB). Students must submit a completed student learning contract to officially register for their internship before the beginning of the internship and before the end of the drop-add period. Retroactive credit or incomplete student learning contracts will not be approved. According to the course catalog, a GPA of 2.0 or better is required for students to participate in internships.

A. STUDENT INFORMATION (to be completed by the student)

Name: _____ Student ID number: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Graduation year: _____ Academic program: _____

Did you have alumni assistance in finding your internship? Yes No If yes, please specify: _____

Student's specific goals and objectives (attach documents if necessary):

B. EMPLOYER INFORMATION (to be completed by the employer and submitted by the student)

Supervisor Name: Mr. or Ms. _____ Title: _____

Company/Organization: _____ Phone: _____

E-mail address: _____ Fax: _____

Street address: _____ City: _____ State: _____ Zip: _____

Intern's salary (kept confidential): _____ Work hours per week: _____

Dates of internship: From: _____ / _____ / _____ To: _____ / _____ / _____
Month Day Year Month Day Year

Description of duties (attach documents if necessary):

C. FACULTY INTERN ADVISOR (to be completed by the faculty intern advisor and submitted by the student)

Name: _____ Academic assignments begin: _____ / _____ / _____

Course department & number: _____ Academic assignments due: _____ / _____ / _____
Month Day Year

Circle number of credits approved: 1 2 3 4 Other: _____ Circle grading scale: S/U or A-F

Academic learning assignments (attach documents if necessary):

D. SIGNATURES -By signing, the student agrees to comply with internship policies on reverse side.

The undersigned understand and agree to complete and satisfy all terms of this learning contract.

Agreement: Student: _____ Date: _____

Employer: _____ Date: _____

Approvals: Faculty Intern Advisor: _____ Date: _____

Department Head (SAS) or Chair of SWSB Internship Committee (SWSB): _____

_____ Date: _____