**IUPUI DEPARTMENT OF SOCIOLOGY**

**SOC R594 GRADUATE PROGRAM INTERNSHIP AGREEMENT FORM**

This form coordinates and clarifies the expectations and responsibilities of the student, the sponsoring work organization, and the faculty member supervising graduate internships. The form is to be completed by student and job supervisor, in consultation with the faculty advisor):

Student Name:

Credit hours desired:   
  
Semester(s):

**SPONSORING ORGANIZATION FOR THE INTERNSHIP**

Name of sponsoring work organization:   
Address:

Hours per week: Starting date:

Salary or stipend: Completion date:

This student: (check one)   
\_\_\_is new to this organization OR

\_\_\_is currently employed by this organization OR

\_\_\_has been previously employed at this organization.

**BRIEFLY ANSWER THE FOLLOWING QUESTIONS**

1. How often will the intern and job supervisor meet together to discuss intern progress?

1. Description of work tasks and responsibilities (or attach internship job description).

1. Additional professional development opportunities available to the intern include:
2. By completing the internship, this intern will learn and obtain a working knowledge of:

1. This intern will develop the ability to

**ACADEMIC REQUIREMENTS OF THE INTERNSHIP:**

\_\_\_The intern will complete a weekly journal of activities   
  
\_\_\_The Intern will complete a final reflective application paper.

\_\_\_Other, please describe

**SIGNATURES AND CONTACT INFORMATION OF COLLABORATING PARTNERS:**

**Student’s name (please print):**   
  
Student’s signature:

telephone: E-mail:

**Faculty Advisor’s name (please print):**

Faculty Advisor’s signature:

Telephone: E-mail:

**Job Supervisor’s name/title (please print):**

Job Supervisor signature:

Telephone: E-mail:   
  
 **Copies of this agreement should go to the Job Supervisor, Faculty Advisor, the Director of Graduate Studies in Sociology, and the student.**