Learning Contract for Internship Course (375:487, 375:488, 375:455, 375:456)

As the student performing the internship under one of these course numbers, I agree to the following. The criteria below are in agreement with the policies outlined in the Student to Professional Internship Network (SPIN) program: <http://sebsspin.rutgers.edu/> ; however registration with SPIN is not necessary.

1. I agree to perform at least 126 hours of work for 3 credits of internship, whether paid or unpaid. (For a different number of credits, I agree to perform 42 hours of work per credit).
2. I know that my supervisor needs to email the coordinator (Dr. Schaefer) a short letter certifying that my performance was satisfactory and fulfilled the minimum number of hours of work required for this internship.
3. I agree to write 3 learning goals identifying what I hope to learn through this experience and how I plan to evaluate whether this learning goal has been satisfied. These need to be approved by the supervisor and coordinator (Dr. Schaefer) prior to starting the internship.
4. At the end of the internship, I agree to write a 5-7 page paper (12-point font, double-spaced), that discusses how my internship experience increased my ability to interpret data, information, and ideas, using my learning goals as a guide. The paper needs to include the following sections: (a) Description of the internship, (b) Discussion of the objectives which were fulfilled and which were not, (c) Discussion of any unexpected learning outcomes (d) Identification of new areas of personal development (e) conclusion summarizing the pros and cons of your experience.
5. I will submit this paper to the coordinator of the course by the last day of regular classes for the semester in which I am enrolled in the internship course, or when the minimum hour requirement has been met.
6. I agree to notify the coordinator (Dr. Schaefer) of the course *immediately* in the event that I experience any problems with my internship, including but not limited to: not being able to complete the required number of hours in the allotted time, having a conflict with my supervisor, finding the internship is not appropriate for course credit or otherwise unacceptable, suspecting that I may be experiencing sexual harassment, discrimination, injury or other workplace issues, etc.

By signing (by hand or digitally) my name below, I understand and agree to all the terms listed above:

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I can confirm my acceptance of these conditions by copying the above text into an email to the coordinator. Once I receive acknowledgement from the coordinator that this email has been received, this contract is considered to be signed.