

INTERNSHIP DESCRIPTION

(To be completed by student and site supervisor. A copy of this form should be forwarded to the Faculty Supervisor.)

Name _____ Student ID: _____

Semester/Session _____ Number of credit hours requested: _____
(More than 4 hours requires completion of the appeal form.)

Name of internship Site: _____

Number of on-site hours: (30 on-site hours are required for each credit earned, e.g. 4 credits = 120 site hours.)

Hours per week _____ x Internship weeks _____ = _____ total on-site hours

Internship Schedule:

Day: Mon. Tues. Wed. Thurs. Fri. Sat.

Time: _____

What are the intern's daily responsibilities? (A job description may be attached)

Please list additional projects, training, or meetings the intern will be able to attend.

How will the student be evaluated? Midterm and final evaluations are required for all interns to receive academic credit. Evaluations should be returned to the Career Services department at the midpoint of the internship and during the final week of the internship.

Site Supervisor Contact Information:

Name: _____ Department: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____ Fax: _____

Site Supervisor Signature: _____

Please return to: Lisa Littlefield, Director of Career Services, Oglethorpe University
4484 Peachtree Road, NE, Atlanta, GA, 30319. Fax: (404) 504-3449