

College of Sciences

Experiential Education Learning Contract For Internship, Practicum, and Co-op



CONTACT INFORMATION

First Name

Last Name

UIN

ODU Email

Phone

Alternate Phone

POSITION INFORMATION

Intern/Practicum/Co-op Site

Web Site

Supervisor Name

Supervisor Email

Supervisor Phone

Address

Hours/Week

Rate/Hour

Start Date

End Date

IMPORTANT: Attach your position description (or detailed list of your role and responsibilities) to this form. List duties, projects, learning goals to be completed, etc. as appropriate. A job offer letter may be substituted if it includes this information. It will help the academic department determine if the position is appropriate for your major or minor.

ACADEMIC AGREEMENT

Major/Minor

How did you hear about this position?

Faculty

FOR COURSE REGISTRATION ONLY

Semester

Year

Subject

Course#

CRN#

Credits

A pass/fail grade for this course will be issued only if the following criteria are met:

- CAP Authorized in CareerLink.
- Completed required hours in the Internship/Practicum/Co-op position as required by major.
- Completed and submitted Work Report, Reflection Paper, or Journal, as required by major.
- Completed and submitted Student Satisfaction Survey and Supervisor Rating Scale.
- Completed and submitted an updated resume.

IMPORTANT: F-1 Visa holders must follow the Curricular Practical Training Checklist and submit the required forms. In the event this contract is amended, written notice and approval are required.

Student Signature

Date

College Liaison

Date

Supervisor Signature

Date

Faculty Signature/Department

Date