

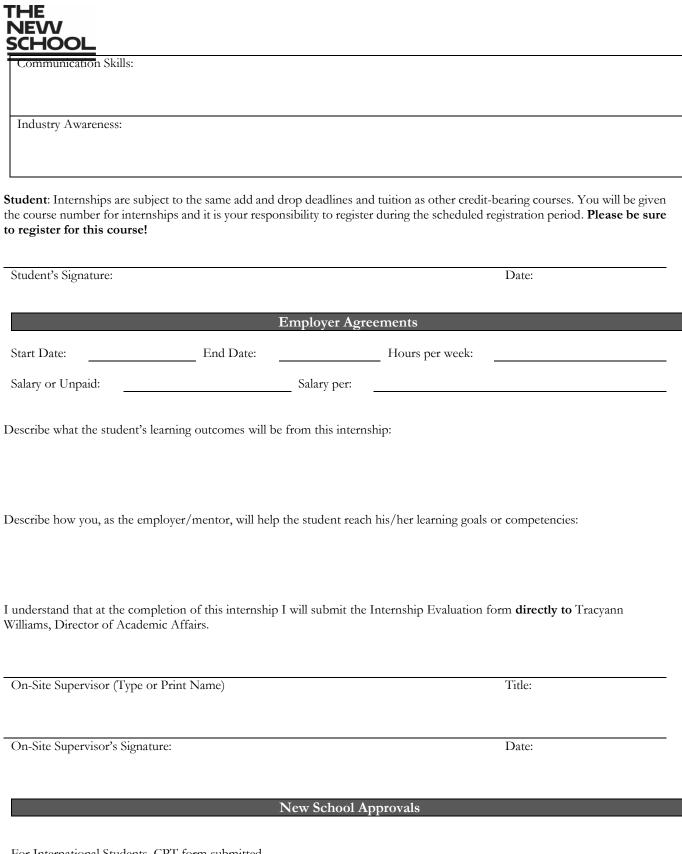
BACHELOR'S PROGRAM FOR ADULTS AND TRANSFER STUDENTS

INTERNSHIP CONTRACT

This contract is between the student and employer to establish a relationship for educational purposes. It is to be completed and signed by the student and employer. To approve the internship for credit, the employer's description of the intern's responsibilities must be attached. Please submit this on the company's letterhead. The student must work 10 - 12 hours per week for the semester to earn 3 credits. The work must be completed no later than the end of the current semester.

At the completion of the internship the student writes a 4-7 page report describing the experience and linking it to their areas of study. The employer will be provided with an evaluation form to assess the intern. These are to be submitted separately to Tracyann Williams, Director of Academic Affairs (WilliamT@newschool.edu).

Student Information			
Student Name:		Student ID #	
Student Email:	Semester/Yr:	# Credits:	
Title for Transcript (24 letters maximum)			
Emplo	oyer Information		
Employer:		Department:	
Supervisor's Name:		Title:	
Supervisor's Email:	Supervisor's pho	one #:	
Street Address:			
City:	State:	Zip Code:	
How does this internship relate to your area of study and Why did you select this company/organization for your i		TICKES	
What skills do you hope to gain? (List in the categories be	elow)		
Creative/Technical Skills: Professional Skills:			



For International Students, CPT form submitted __ Bachelor's Program Designee Signature: Date: