******INTERNSHIP LEARNING PLAN AGREEMENT**

Semester/Year Course Number

Instructor

Student's Name

Student’s Email Phone #

Fresno State Student ID Number

Internship Site Supervisor's Information:

Name Title

Email Phone #

Internship Site Agency/Organization

Department

Name of Department Manager

Business Address

Phone # ( )

Internship Job Title:

Position Description (attach additional pages if needed)

Check One:

❑ Paid Internship Salary $ per

❑ Unpaid Internship

Number of Hours of Internship Service Per Week

Length of Internship: Starting Date Ending Date

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In addition to the position description provided above, in the matrix below state what you (the student) hope to learn from your internship experience. Also, state what activities or projects you (the student) will be participating in during your internship that will allow you to achieve your learning objectives. The student will work collaboratively with their internship course faculty and the internship site supervisor to develop these objectives and projects.

|  |  |
| --- | --- |
| **LEARNING OBJECTIVES** | **ACTIVITIES/PROJECTS** |
| Objective No. 1 |  |
| Objective No. 2 |  |
| Objective No. 3 |  |
| Objective No. 4 |  |
| Objective No. 5 |  |

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**STUDENT PARTICIPATION GUIDELINES**

1. I (Student) will devote \_\_\_\_\_\_ hours per week towards completion of the learning objectives listed in my learning plan for a total of  **internship service hours**, effective from \_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. I agree to complete any paperwork and orientations required by my professor or site supervisor as part of this learning activity.
2. I understand and acknowledge that there are potential risks associated with this internship, some of which may arise from (a) my assigned tasks and responsibilities, (b) the location of the learning activity, (c) the physical characteristics of the Internship Site, (d) the amount and type of criminal activity or hazardous materials at or near the location of the Internship Site, (e) any travel associated with the Internship, (f) the time of day when I will be present at the Internship Site, (g) the criminal, mental and social backgrounds of the individuals I will be working with or serving, and (h) the amount of supervision I will receive. I further understand and acknowledge that my safety and well-being are primarily dependent upon my acting responsibly to protect myself from personal injury, bodily injury or property damage.
3. Being aware of the risks inherent in this Internship, I nonetheless voluntarily choose to participate in this Internship. I understand that I may stop participating if I believe the risks become too great.
4. While participating in this Internship, I will **(a)** exhibit professional, ethical and appropriate behavior; **(b)** abide by the Internship Site’s rules and standards of conduct, including wearing any required personal protective equipment; **(c)** participate in all required training; **(d)** complete all assigned tasks and responsibilities in a timely and efficient manner; **(e)** request assistance if I am unsure how to respond to a difficult or uncomfortable situation; **(f)** be punctual and notify the Internship Site if I believe I will be late or absent; and **(g)** respect the privacy of the Internship Site’s clients.
5. While participating in this Internship, I will not **(a)** report to the Internship Site under the influence of drugs or alcohol; **(b)** give or loan money or other personal belongings to a client; **(c)** make promises to a client I cannot keep; **(d)** give a client or representative a ride in my personal vehicle; **(e)** engage in behavior that might be perceived as harassment of a client or Internship Site representative; **(f)** engage in behavior that might be perceived as discriminating against an individual on the basis of their age, race, gender, sexual orientation, physical and/or developmental or intellectual capacity or ethnicity; **(g)** engage in any type of business with clients during the term of my placement; **(h)** disclose without permission the Internship Site’s proprietary information, records or confidential information concerning its clients; or **(i)** enter into personal relationships with a client or Internship Site representative during the term of my placement. I understand that the Internship Site may dismiss me if I engage in any of these behaviors.
6. I agree to contact the University’s Administrator of Environmental Health and Safety, Risk Management & Sustainability at (559) 278-6910 if I believe I have been discriminated against, harassed or injured while engaged in this Internship. Please call Campus Police after hours 278-8400.
7. I understand and acknowledge that neither the University nor the Internship Site assumes any financial responsibility in the event I am injured or become ill as a result of my participating in this learning activity.  I understand that I am personally responsible for paying any costs I may incur for the treatment of any such injury or illness. I acknowledge that the University recommends that I carry health insurance.

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# GENERAL PROVISIONS

1. The Internship Site agrees to provide an orientation that includes a site tour; an introduction to staff; a description of the characteristics of and risks associated with the Internship Site’s operations, services and/or clients; a discussion concerning safety policies and emergency procedures; and information detailing where students check-in and how they log their time. They will also provide applicable training and safety equipment that may be necessary.

2. The University will provide all students enrolled in an Internship Course with Student Academic Field Experience for Credit Liability Insurance (SAFECLIP). This insurance coverage provides professional and personal general liability coverage for students enrolled in Internship Course sections for which they are receiving academic credit. This insurance only applies if both parties have signed this Agreement. Proof of such coverage will be provided upon request to the Internship Site.

3. The Internship Site and the University agree to indemnify, defend and hold harmless each other from any and all liability for any personal injury, damages, wrongful death or other losses and costs, including but not limited to reasonable attorney fees and defense costs, arising out of the negligence or willful misconduct of their respective officers, employees, agents or volunteers in the performance of this Agreement. This paragraph will survive expiration or termination of this Agreement.

4. The University and the Internship Site agree to maintain general liability coverage of at least $1,000,000 per occurrence, $2,000,000 aggregate and to provide evidence of coverage upon request. Insurance must be placed with insurers with a current A.M. Best rating of at least A or a qualified program of self-insurance.

5. The Internship Site should notify the University as soon as is reasonably possible of any injury or illness to a student participating in a learning activity by calling (559) 278-6910 or (559) 278-8400.

6. The Internship Site and the University will meet upon request or as necessary to resolve any potential conflicts and to facilitate a mutually beneficial experience for all involved.

7. The Internship Site may dismiss a student if the student violates its standards, mission or goals. The Learning Site will notify the University as soon as reasonably possible of the student’s dismissal.

**I have read, understand and agree to comply with these guidelines.**

Student Date

Internship Course Faculty Date

Internship Site Supervisor Date

Academic Department Chair Date