111 West Congress Street Charles Town, WV 25414 Tel 877-755-2787 www.apus.edu

Elective Internship Agreement Form

American Public University System (APUS), is comprised of American Military University (AMU) and American Public University (APU).

The term *Student* and *Intern* will be used interchangeably to refer to the individual participating in the educational experience.

General Information - For Student

Your internship is intended to be a hands-on learning experience. This is your chance to take classroom learning and put it to use in a real-world setting. To that end, internships taken for credit must meet the following three components to ensure appropriate learning outcomes:

- 120 hours or more at the site per 3 credit hour course;
- In-class participation; and
- A final course project.

For those not taking this for credit, a minimum of 40 hours will be required at the site.

The *Elective Internship Agreement* is comprised of two parts. The first, the Student Conduct Agreement, must be read, initialed, and signed by the student. The second, the Internship Site Learning Agreement, should be started by the Student, and then completed by the Site Supervisor. Both documents must be returned together to your APUS point of contact no later than five business days before the course start date.

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Student Conduct

Please initial by each statement after reading thoroughly

	During the internship, you are representing not only faculty, staff and alumni. Your performance and atti you and beyond this experience. You will uphold fol Honor Code as stated in the Student Handbook.	tude will have implications beyond
	You are governed by your site's employment policie of conduct, as applicable. To avoid misunderstanding clear guidelines from your site supervisor before you	ngs, it is recommended that you obtain
	Your commitment to on-site work for the internship class. Permissible work absences include illness or o responsible for notifying your site supervisor of abserprocedures, as well as your APUS point of contact.	ther serious circumstances; you are
	Any changes in your internship status (removal, cut) must be reported immediately to your professor.	pack of hours, dismissal, etc.)
	nd and have read the information above and agree to onsibility to contact my faculty member should possib	
Student N	ame:	Student ID:
Signature:		Date:

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Internship Site Learning Agreement

For Student to Fill Out:	
Student Name:	Student ID:
Hours per week:	Estimated Total Hours:
Start Date:	Estimated End Date:
Internship will be taken for (check one): Academic credit No academic credit	Organization/Company Name:
For Site Supervisor to Fill Out:	
Project/Internship Description:	
Expectations/Outcomes/Goals from this work:	
By signing below, I acknowledge and understand the int goals as outlined above. The Site Supervisor has thorough who is responsible for successful completion of the specing guidance and mentorship. The Site Supervisor agrees (i) evaluate the Student's performance as part of the interration to sign the verification of hours form supplied by the Studentification form will be shared with appropriate APUS of completion status and will factor into the Student's final provide a safe environment in compliance with all federal APUS and students of hazardous conditions and unusual conditions. Supervisor Name	ghly discussed this information with the Student, ified expectations under the Site Supervisor's to complete an exit interview, where he/she will aship, and (ii) subject to any necessary changes, ident. The exit interview evaluation and hours faculty and staff to assess the Student's course I grade in the internship course. The Site will all and state guidelines and laws, and will inform I circumstances that may create unsafe
Supervisor Signature	
Student Signature	Date: