

170 Dauer Hall PO Box 117405 Gainesville, FL 32611 352-392-2016 352-392-5679 Fax

Spanish & Portuguese Studies Internship Application Form

This form represents one step in a two-step application process. All steps must be completed by the posted application deadline for the semester. The full internship course application process includes:

Step 1. Application Form [this form] – to be completed by you and your supervisor. Scan the completed form and email the digital copy to Dr. Antonio Sajid López (**antoniosajid@ufl.edu**), internship coordinator. If you cannot scan this document, submit the hardcopy to us at 170 Dauer Hall or by fax to 352-392-5679.

Step 2. Email Notification – You will be notified via your GatorLink e-mail whether or not your internship position is approved to earn credit. If approved, SPN/POR 3943 will automatically be added to your schedule.

I. STUDENT INFORMATION - To be completed by the student

Name:			UFID:		
Email:			Phone:		
Company Name & In	ternship Title	2:			
Start date:		End date:		Hours per w	veek:
Term: 🗖 FALL	□ SPRING	SUMMER A	A □SU	MMER B	□ SUMMER C

Student's Goals/Learning Objectives for the internship: What do you intend to learn through this experience?

Learning Activities: Describe how your internship will enable you to meet your learning objectives. Include projects, research, report writing, meetings, etc., that will be a part of your internship, relating them to your learning objectives

II. EMPLOYER LEARNING AGREEMENT - To be completed by the Internship Supervisor. Please print. Based on Brittany Grubbs' internship course for Beyond 120 and approved by General Counsel.

Supervisor's name:			
Email:		Phone:	
Company/Organization:			
Department:			
Address of Internship Location:			
Start date:	End date:		Hours per week:

The intern will work alongside me, the supervisor, in a space designated for the intern on my business premises where I will provide direct and daily supervision. *Please initial to confirm*:

Intern's Responsibilities and Duties		

Supervision: Describe the supervision to be provided by your organization. What kind of orientation, instruction, consultation, feedback, assistance, and/or mentorship will the student receive?

III. AGREEMENT & CONSENT - To be signed by Internship Supervisor and Student. *Internship Supervisor*: In signing below, I, the supervisor, verify the following:

- my organization is an established for-profit, nonprofit or governmental entity recognized as such within my professional community;
- my organization is bonded and/or holds enough business and liability insurance to cover students interning with my organization and on my business premise;
- ✓ my organization has a professional, informative website at which students can research my organization;
- ✓ my organization complies with the Department of Labor's Fair Labor Standards Act and my internship pays a fair wage, a legal stipend or meets each of the six criteria outlined by the Department of Labor for an unpaid internship [explore the FLSA criteria at http://1.usa.gov/9HJ8Eh];
- ✓ I will communicate with my interns using my organization's professional email address (no gmail, yahoo, etc.);
- ✓ I will provide my interns with direct and daily supervision and guidance in person and I will be accessible to my interns on a regular basis;
- ✓ I will provide workspace for my intern with the necessary resources to complete the internship duties and course requirements;
- ✓ I will assign meaningful learning tasks/projects that are consistent with the internship description;
- ✓ I will complete student midterm and final evaluations as required by the internship course; and
- ✓ my interns will be working in a professional, established working environment (home-office sites and virtual/work from home or "in the field" internships are not eligible for this course).

Supervisor signature:Date:	Supervisor signature:	Date:
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Student: In signing below, I, the student intern, acknowledge and accept the following:

- ✓ I understand that The University of Florida has no control over any hazards to which I may be exposed during the internship and I do not hold the University liable for any accidents that may occur;
- ✓ I will adhere to all personnel rules, regulations, and other standard requirements of the host organization;
- ✓ I have appropriate computer and internet access at the site to complete all assignments;
- ✓ I agree with all components of the Learning Agreements and agree to carry out the objectives, strategies and methods of the agreement promptly and to the best of my ability;
- ✓ I authorize The University to confirm my course enrollment status with my internship supervisor;
- I understand and agree to the grading policy for this course, and I understand that it is my
 responsibility to track the progress of my grades during the course;
- ✓ I have read the syllabus and understand that within the specified date range: I must complete the internship; I must complete the agreed upon weekly hours; and I must properly complete the course assignments to pass this course; and
- ✓ I understand that if I fail to adhere to this agreement, I will not receive a passing grade or the corresponding academic credit for this course.

Student signature:

Date:

COURSE CONTACT INFORMATION

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