AIS 484 INTERNSHİP CONTRACT

_______________________________, ASU I.D.# _____________________ on this date ___/___/___ ,
(Print or type student name)
agrees to an internship with ____________________________________________ for _____ total
(Print or type company/organization internship site)
contract hours, to begin on ________________________________, and be completed by __________.
(Start date)        (End date)

Based on contract hours designated, the intern will register for _____ semester hours of academic credit.

Site Supervisor: ___________________________________________   Phone: (___) ______________
(Print or type supervisor name and title)
Email: ___________________

INTERNSHIP SCHEDULE:
In the space below, designate the scheduled days of the week and approximate times the intern normally
would be expected to be on the job.

MONDAY _________________  THURSDAY _________________
TUESDAY _________________  FRIDAY _________________
WEDNESDAY _______________  SATURDAY _________________
SUNDAY ____________________

The intern and the organization agree on the following (or attached) general job description or statement
of goals/objectives. As specifically as possible, this statement should indicate what the intern will be
expected to do or accomplish during the internship in order to meet both organizational and academic
goals.
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

_________________________ ________________________ _________________________
(Intern’s Signature)    (Site Supervisor’s signature)   (ASU Internship Advisor’s signature)

______________________________________ ____________________________________ _____________________________________
(Print Name)    (Print Name)    (Print Name)

Copies of this contract are to go to: the Intern, the Site Supervisor, and the ASU Internship Coordinator.