



DEPARTMENT  
OF HISTORY  
AND CLASSICS  
PROVIDENCE COLLEGE

# HISTORY INTERNSHIP LEARNING AGREEMENT

*This form is to be used by undergraduates seeking course credit.*

## STUDENT INSTRUCTIONS:

**DRAFTING YOUR LEARNING AGREEMENT:** The primary purpose of this agreement is to describe what you intend to learn during the course of your internship, how you intend to learn these things, and the means by which your *faculty* and *site supervisors* can assess the achievement of your learning objectives. **As the student intern, you are directly responsible for drafting and submitting your learning agreement.** It is expected that you will meet with your *faculty supervisor* and *site supervisor* to discuss the information requested.

**Failure to submit this completed, signed agreement to the Department of History and Classics within the first 2 weeks of the start of the semester will jeopardize your course registration.**

**SUPERVISION:** All students must have both a *faculty supervisor* and a *site supervisor*. The *faculty supervisor* oversees the academic components of the internship while the *site supervisor* oversees your performance at the internship site. You will maintain regular contact with your *faculty supervisor* during the term of your internship in order to assess your progress toward your learning objectives and to discuss issues and/or concerns that may arise. Your *faculty supervisor* will also offer specific information about course requirements including the minimum number of internship hours expected and course assignments.

**COURSE REGISTRATION:** Once you have department approval for your internship, you will be enrolled in HIS 450: History Internship.

Student Name: \_\_\_\_\_ Graduation Year: \_\_\_\_\_  
Cell Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_  
Faculty Supervisor Name: \_\_\_\_\_ Semester of Registration: \_\_\_\_\_  
Faculty Phone Number: \_\_\_\_\_ Faculty Email: \_\_\_\_\_  
Internship Organization: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Site Supervisor Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_  
Internship Title: \_\_\_\_\_  
Rate of Pay (if applicable): \_\_\_\_\_  
Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_ Hours per Week: \_\_\_\_\_

**POSITION SUMMARY:** Write a brief description of the internship, including the work schedule.

**LEARNING OBJECTIVES:** These are assignments that describe **what** you expect to learn. Learning objectives might include your intention to expand/develop **knowledge** in a specific area, improve/develop specific **skills/competencies**, or develop **personal insights** regarding your values or attitudes. It is recommended that you list at least 4 to 6 learning objectives. Your *faculty* and *site supervisor* will assist you in the development of your learning objectives.

**LEARNING STRATEGIES/ACTIVITIES:** These are statements that describe **how** you intend to achieve your objectives. Examples of how you might achieve your learning objectives include: you perform specific tasks on a project, someone trains you, you ask for observation and seek feedback, you attend meetings, you research a topic, etc. Please list at least 1 learning strategy for each learning objective specified. Your *faculty* and *site supervisor* will assist you in the development of your learning strategies/activities.

**FACULTY SUPERVISOR CONTACT:** Describe arrangements for and frequency of contact with your faculty supervisor during the term of your internship/ field experience (e.g., *in person meetings, phone, emails, seminar participation*). Consult with your *faculty supervisor* regarding your arrangements for contact.

**EVALUATION:** This is the means by which your *faculty supervisor* assesses the achievements of your learning objectives. Assignments to be evaluated will be determined by your *faculty supervisor* and they may include but are not limited to: *a reflection journal, papers, readings, projects, seminar participation, etc.* List all course assignments.

***This agreement, signed by all parties, indicates that the student is undertaking an internship course at Providence College and will earn academic credit upon successful completion of all course requirements.***

All parties agree that the internship or field experience will not conflict with attendance at regularly scheduled classes and that the student intern will adhere to the policies and procedures of the sponsoring organization. The organization agrees with the internship description outlined in this form and agrees to provide assistance, training, supervision, and consultation to support the student intern's learning objectives.

**REQUIRED SIGNATURES**

**DATE**

**Student:** \_\_\_\_\_

**Site Supervisor:** \_\_\_\_\_

**Faculty Supervisor:** \_\_\_\_\_

**Department Chair/Program Director:** \_\_\_\_\_

Once your final version is complete and signed by all parties, make 3 copies. Keep 1 copy and give copies to your *faculty and site supervisors*. Submit the *original, signed* agreement to the Department of History and Classics **within the first 2 weeks of the start of the semester**. Failure to submit the agreement within the timeframe stated above will jeopardize your internship course registration.