



# Washington University in St. Louis

## COLLEGE OF ARTS & SCIENCES

### Internship Learning Agreement

Students can gain academic credit (P/F) for unpaid internships only. The Internship Learning Agreement is completed by the student, in collaboration with the faculty sponsor and site supervisor. This Agreement serves several purposes:

- To provide a framework or structure for the internship experience;
- To serve as a reminder to all learning partners (student, supervisor, and faculty sponsor) of the purpose and activities of the internship;
- To provide the basis for evaluation and validation of the learning experience.

This Learning Agreement must be completed and filed with the College Office, faculty sponsor, and site supervisor **no later than two weeks after the first day of the internship**. It is important for learning objectives, expectations, and requirements to be set at the beginning of the internship. Therefore, **credit cannot be awarded retroactively**. 45 hours worked is equal to one academic (elective) credit. In addition to completing the hour requirement, you must work a minimum of eight weeks to earn three credits or a minimum of six weeks to earn one or two credits.

After completing this form, students should follow these steps to receive academic credit in Arts & Sciences:

- **Register for the course number** as advised by your faculty sponsor. For most summer internships, you may register for the credit to appear on your transcript in the following fall. For all internships, you must register by the appropriate semester add/drop date.
- **For General Studies credit, write one double-spaced reflection paper** and turn it in via e-mail to Dean Ganapathy (mdganapa@wustl.edu).

*Questions? Contact Maya Ganapathy at 314-935-4936 or mdganapa@wustl.edu*

**Please complete the following information**

Student Information

First Name:

Last Name:

Email Address:

Phone Number:

Organization / Company Information

Company Name:

Department:

Address:

City:

Supervisor Information

Name:

Title:

Email Address:

Phone Number:

Faculty Sponsor Information

Name:

Department:

Email:

Phone:

Campus Box:

### Internship Details

Position Title:

Start Date (MM/DD/YYYY):

End Date (MM/DD/YYYY):

Hours per week:

### Additional Information

How did you find this opportunity?

What tasks will you be responsible for at this internship?

What do you want to gain from this internship? For example, do you hope to explore career possibilities, develop new skills, test theories learned in class, etc.? Please list/describe.

How will you present to your faculty sponsor that you accomplished the goals outlined in the “educational objectives” section? Examples include a journal, samples of work completed, a paper, etc.

**Please obtain signatures of all relevant learning partners and be sure all parties have a copy of this agreement.**

Intern's signature:

Date:

Site Supervisor:

Date:

Faculty Sponsor:

Date:

Approval from College of Arts & Sciences:

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Dean Ganapathy

**PLEASE RETURN THIS FORM TO:**

The College Office  
Attn: Dean Ganapathy  
104 Cupples II  
Box 1117  
One Brookings Drive  
St. Louis, MO 63130