

INTERN:

I agree to perform the duties appropriate to this internship and fulfill the requirements for academic credit. This includes:

- ____ work hours for ____ credit hours
- Scheduled meetings with UNCG intern faculty supervisor
- Class meeting with other interns
- Participation in and completion of BB assignments,
- Internship paper
- Other requirements as assigned

Signature: _____ Date signed: _____

INTERN SUPERVISOR:

I agree to accept this intern for projects and work that relate to communication studies and for the number of hours necessary to meet the above credit hours (90 work hours for 3 credit hours; 180 work hours for 6 credit hours). I agree to abide by the conditions of the Instructional Agreement signed by your organization, to document hours work. I agree to send the evaluation form to Patricia Fairfield-Artman upon completion of the internship.

Signature: _____ Date signed: _____

UNCG FACULTY MEMBER:

I accept this internship proposal for consideration for credit for CST 412

Signature: _____ Date signed: _____

Return to:

Department of Communication Studies

102 Ferguson Building

UNCG

Greensboro, NC 27402

Attention: _____