



New College of Interdisciplinary Arts & Sciences
 Ethnic Studies Program
 Phone #: 602-543-6007
 Email: Ethnic.studies@asu.edu
Internship Agreement – Page 1

Please Print or Type Application

Student Name: _____ ASU ID # _____

Faculty Internship Advisor: _____

Faculty Phone # and email address:

Site Contact Information:

Internship Site Organization and Address to include city and zip code: _____

Supervisor Name: _____

Phone #: _____

Email address: _____

Total Internship Hours: _____ Total Semester Hours: _____
 (45 hours = 1 credit; i.e. 135 internship on-site hours = 3 semester hours of academic credit)

Internship Start Date: _____ End Date: _____

Internship Schedule:

Monday _____ Tuesday _____ Wednesday _____

Thursday _____ Friday _____ Sat. /Sun _____

**Please attach a signed copy of the Duties, Goals, and Evaluation of Performance (See Page 2)
 Submit to:**

**Ethnic Studies Program, New College of Interdisciplinary Arts & Sciences
 Arizona State University, PO Box 37100, Phoenix, AZ 85069-7100**

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The student and internship site supervisor agree on the following job description, statement of goals/objectives, and method of evaluation.

Please sign below and date:

Student: _____

Faculty Director: _____

Internship On-Site Supervisor: _____

Internship Coordinator: _____