

Student Name: _____

UVID: _____

Phone #: _____

Email: _____

Purpose:

The purpose of an internship is to obtain practical and valuable work experience pertinent to your study of language, and to gain exposure to various job opportunities. An internship must be directly related to your language major or minor and must be approved through the department.

Directions:

- Meet with the Academic Advisor, Kindra Amott, CB 506P.
- Find an internship that relates to the study of Languages (Suggestion: uvu.edu/uvjobboard)
- Complete the Learning Agreement (below) with a Language professor who is willing to supervise your internship. Arrange to communicate with your supervising professor throughout the semester, complete the work as outlined, and submit related assignments to document fulfillment of the goals for your internship.
- Complete the online internship orientation: <http://www.uvu.edu/internships/student/orientation.html>
- Meet with the dept. internship coordinator, Greg Briscoe (CB 307), to have your internship approved and obtain approval signature.
- Register for the course after you receive an email from Kindra Amott with your specific course number.

Internship Site Information

| | | |
|------------------------|-------------------------------|-----------------------|
| Employer: _____ | Site Supervisor: _____ | Phone #: _____ |
|------------------------|-------------------------------|-----------------------|

 Compensation: ☐ Wage/Stipend ☐ Unpaid ☐ Other _____

 Master Internship Agreement form submitted? ☐ Yes ☐ No

If this internship takes place outside the U.S., contact the International Center (WB 100) for Director Signature: _____

Learning Agreement To be completed with the Supervising Professor

List your Primary Learning objectives. Describe what you hope to learn and accomplish from this experience. (Continue on next page, if necessary.)

Objectives: (What skills will you gain that will apply to your study of language?)

Steps to Accomplish: (What activities will you engage in that will enable you to gain the skills mentioned in your objectives?)

Method of Measurement: (How will your supervisor determine that you have completed the work experience as well as the academic component of your internship? e.g. submit a journal, write a final paper, submit lesson plans, etc)

Name of Supervising Professor: _____ Signature: _____ Date: _____

I have met with the above instructor to discuss the requirements for this internship and agree to complete the work as outlined above by the end of this semester.

Student Signature: _____ Date: _____

Internship Coordinator Approval Greg Briscoe 801-863-7224

Signature: _____ Date: _____

Total number of working hours: _____

Approved academic credit hours: _____ (75 working hours per academic credit hour)

Internship Orientation Complete? ☐ Yes ☐ No

Registration Information Credit Applied to major? ☐ Yes ☐ No

 Semester: ☐ Fall ☐ Spring ☐ Summer

 Previous Internships? ☐ Yes ☐ No