Interns and employers are expected to fulfill the following responsibilities. Print and sign the form indicating your acceptance and commitment.

Employers

1) Provide meaningful internship experiences for students.
2) Provide direction and a supportive learning and working environment for interns.
3) Maintain open communication with the intern and internship coordinator.
4) Submit evaluation forms at mid term on___________ and at end of the semester (term) on___________.

Evaluation forms should be submitted to the Office of the Dean of the School of Business Administration:

Dr. Robert Bennett School of Business Administration
800 Georgia Southwestern State University Drive
Americus, GA 31709
Phone: (229)931-2725
Email: Robert.bennett@gsu.edu

5) Discuss duties and responsibilities with the intern and submit a signed this agreement at the beginning of the term (no later than the first week of the semester or the term).
Intern Responsibilities

1) Professionally and confidentially perform duties defined by the Employer as reflected in the position description.
2) Work 15-20 hours/week throughout the semester or summer in the Employer (at least 120 hours are required for completion of the internship).
3) Be dependable, reliable and honest.
4) Be prompt.
5) Display a positive and enthusiastic attitude about internship activities.
6) If desired by the Employer, provide well researched recommendations for organization enhancement.
7) Prepare a final report in accordance with the format. This report must be submitted by the first day of final examination period. The intern must also submit their self-evaluation form with their final report.
8) Supervisor evaluation is your responsibility. The evaluation must be turned prior to mid-term and one week prior to the end of the semester (term) or the beginning of the final examination period.
9) Complete and submit the Self-evaluation form by the end of the semester (term).

Please explain the duties and responsibilities for this position. You may attach a job description if necessary.

Describe the learning and experimental outcome to be derived by the student intern.

Student Name: ___________________________ Date: ____________________

Student Signature: __________________________

Employer Name (Supervisor): __________________________ Date: __________

Please Print

Employer (Supervisor) Signature: __________________________

Director of the MBA Program Signature: __________________________ Date: __________

Dean of the School of Business Signature: __________________________ Date: __________