

INTERNSHIP JOB DESCRIPTION FORM

STUDENT SECTION

Name (Last, First, Middle): _____

M Number: _____ Murray State Email: _____

Preferred Phone #: _____ Internship Course Name/Number: _____

Internship Course Instructor of Record: _____

Student Signature: _____ Date: _____

EMPLOYER SECTION

Internship Requirements

1. Provide a clear job/project description for the work experience
2. Orient the student to the organization, its "culture" and their work assignment(s)
3. Assist the student in developing/achieving personal learning objectives
4. Offer feedback to the student on a regular basis
5. Willingness to host an on-site visit from campus representative sometime during the work term
6. Complete formal written evaluations at the conclusion of the work experience

Organization Name: _____

Address (street, city, state & zip): _____

Supervisor Name: _____ Title: _____

Preferred Phone #: (____) _____ Email: _____

Website: _____

Student Title (position on the job): _____

Average number of hours/week: _____ Salary/Wage/Commission: _____

Start Date: _____ Finish Date: _____ Total Number of Weeks: _____

In order for a student to receive a passing grade for an internship experience, the student must remain on the job for the entire period assigned and perform to a satisfactory level all duties and work assignments given by the employer and/or faculty advisor.

Employer Signature: _____ Date: _____

INTERNSHIP JOB DESCRIPTION

*The **Internship Supervisor** and **Student** should collaborate to develop the job description, goals and learning outcomes. Submit a separate document or refer to Handshake if applicable.*



MURRAY STATE
UNIVERSITY

Career Services

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Murray State University is an equal education and employment opportunity, M/F/D,AA employer.

INTERNSHIP GOALS/LEARNING OUTCOMES

*You must develop a minimum of three goals/learning outcomes that must be approved by your **Internship Supervisor and Internship Instructor of Record**. You may submit additional documents as needed.*

GOAL/LEARNING OUTCOME # 1 – Include your rationale, objective and measurable evidence (How will you know when you have met your goal?):

GOAL/LEARNING OUTCOME # 2 – Include your rationale, objective and measurable evidence (How will you know when you have met your goal?):

GOAL/LEARNING OUTCOME # 3 – Include your rationale, objective and measurable evidence (How will you know when you have met your goal?):

INTERNSHIP INSTRUCTOR OF RECORD SECTION

Internship Course Name: _____ Internship Course Number: _____

Please review the eligibility of the internship site and job description to ensure this is a credit-worthy experience. Then check the appropriate response to the questions below:

- 1. I have evaluated and approve this organization and job description as an experiential learning experience worthy of academic credit. YES NO
- 2. The learning outcomes and goals align with the internship course. YES NO
- 3. The student is completing the internship during the reported time frame. YES NO
- 4. The student's participation in the internship course will count as an elective. YES NO
- 5. Additional materials will be provided by the Academic Department. YES NO
- 6. To receive academic credit, the student must complete an extra project. YES NO
If yes, please explain:

This internship has been approved by the Internship Course Instructor of Record.

Instructor of Record Signature: _____ Date: _____