



PARKS, RECREATION AND TOURISM MANAGEMENT

INTERNSHIP AGREEMENT

Student Intern: _____

Agency: _____

Agency Address: _____

Agency Supervisor: _____

Supervisor Title: _____

Agency Telephone: _____ Agency Fax: _____

Supervisor E-mail: _____

Intern reporting date: _____ Ending Date: _____

Rate of Compensation/Stipend: _____ Living Arrangements: _____
(if applicable)

MAJOR RESPONSIBILITIES: As the Agency's Internship Supervisor, I have read and agree to provide the above named student with the experiences outlined on the attached "Internship Work Plan". As the Student Intern, I agree to conform with all agency policies and procedures as they pertain to the completion of my internship outlined on the attached "Internship Work Plan".

REQUIRED INTERNSHIP EXPERIENCES: As the Agency's Internship Supervisor, I understand that the internship is a broad educational experience with a wide range of responsibilities that will involve the intern in observing, reporting, participating, assisting, supervising or managing in, but not limited to, the following areas: Administration & Management, Organization & Supervision, and Maintenance & Operations. I further understand that the intern should be given the opportunity to observe the work and working relationships of the agency supervisor within their own organization, at staff meetings, and in connection with other agencies and organizations.

SPECIAL PROJECT: As the Agency's Internship Supervisor, I will help the intern identify and evaluate a special project that will benefit this agency and be completed the internship. As the Student Intern, I understand that it is my responsibility to plan and implement this project.

EVALUATIONS: As the Agency's Internship Supervisor, I understand that I am responsible for completing a mid-term and final evaluation of the student interns performance (evaluation forms will be provided) and facilitating an on-site visit by the student's University Supervisor.

Agency Supervisor: _____
Signature Date

Student Intern: _____
Signature Date

University Internship
Coordinator: _____
Signature Date

Please read, complete and return this agreement as soon as possible to
Internship Coordinator, Department of Parks, Recreation and Tourism Management,
Box 8004, North Carolina State University, Raleigh, NC 27695-8004.
Tel: (919) 515-3276 **FAX: (919) 515-3687.**

