

Academic Internship Agreement (AIA)

International students: Please start the internship application process by meeting with International Student Services.
For questions, information, and support, please contact the Career Center: internships@metrostate.edu or 651.793.1289.

STUDENT INFORMATION

Contact information

Name _____ StarID _____

Metro email _____ Phone _____

Major _____ Minor (if applicable) _____

I am: ☐ an undergraduate student ☐ a graduate student Advisor name _____

Course information

Term ☐ Fall ☐ Spring ☐ Summer Year _____

Internship subject code (example: ICS, TCID, MIS) _____

Internship course title (This will appear on your transcript.) _____

Grading option ☐ Letter grade (if allowed in college/department) ☐ Satisfactory/No credit: S/N

Faculty Learning Evaluator's name (first and last) _____

Email _____ Phone _____

INTERNSHIP SITE INFORMATION

Internship organization name _____

Internship job title _____

The internship will be ☐ 100% on-site/in person ☐ Remote (virtual) ☐ Hybrid (some on-site, some remote)

The internship organization is based in ☐ Minnesota ☐ Other state/country _____

Site supervisor name _____

Email _____ Phone _____

Internship dates (MM/DD/YYYY) Start: _____ End: _____

Number of hours per week: _____

(continued on next page)

Compensation: ☐ Unpaid ☐ Wages \$_____/hour ☐ Stipend \$_____ ☐ Reimbursement (tuition, expenses)

I am currently employed by my internship site: ☐ Yes ☐ No

I have read and meet the required guidelines for the following college:

- ☐ College of Business and Management
- ☐ College of Sciences
- ☐ College of Liberal Arts
- ☐ College of Nursing and Health Sciences
- ☐ College of Individualized Studies
- ☐ College of Community Studies and Public Affairs

LEARNING STRATEGIES

If you require additional space, please attach a separate document with your learning strategies.

Competence statement

What you intend to learn and anticipated learning outcomes.

Learning Strategies

Describe what you are planning to do to achieve your learning outcomes. Include practical and theoretical applications in your field. **Note:** Be sure to include any college/department deliverables such as journals, papers, or group meetings.

Evaluation

Describe how the evaluator will evaluate and document the learning.

Signatures

Metro State University recognizes a typed electronic signature as official approval.

Student signature _____ **Date** _____

Site supervisor signature _____ **Date** _____

Learning evaluator signature _____ **Date** _____

Dean signature _____ **Date** _____