

### **BA Int**

BA Internship Contract	Discipline	
Student Name:	Student ID#:	
Title of Internship	Course #:	
Quarter:	Credits: (each unit = 33 hou	rs)
Name and Address of Site:		
Evaluator Name:	Degree:	
Evaluator Email:	Phone:	
	d by blood, marriage, intimate bond to the student these relationships could impair the effectiveness of ithority of the supervisor.	
Please include your evaluator's resume with th	s contract. Resume on file	_
<b>Learning Objectives</b> Students will be evaluated of <b>1. Assume responsibility for varied duties and j</b> <i>What experiences, duties, assignments, and func</i>	bb functions	

2. Demonstrate the ability to perform tasks previously unknown What specific knowledge, skill and/or attitudinal competencies will be acquired?

3. Complete weekly internship log and appropriate number of hours for the internship credit Student must complete 33 hours per one academic unit

#### Learning Documentation & Demonstration (assessment):

How will accomplishment of learning objectives be demonstrated to the evaluator? What criteria will be used for the assessment? Some examples of documentation and demonstration might be regular meetings with a supervisor, written documentation of activities, work products, level of active participation, etc.

#### **Resources Required:**

What readings or other learning resources will be used, if any?

#### **Evaluator Role:**

Must submit evaluation by last week of the quarter; Evaluators will receive an evaluation form via email What forms of assistance has the evaluator agreed to provide?

Antioch University Santa Barbara holds 5 Primary Goals for internships. We encourage site supervisors and students keep these goals in mind throughout the internship:

- Allow students to provide service to the community;
- Provide students opportunities to apply classroom learning to community problems;
- Allow students to learn new theoretical ideas in experiential contexts;
- Expose students to "real-life" social conditions of various work places and populations; and,
- Give students the opportunity to explore particular work roles and settings in order to make better career choices.

Number of Hours to be Completed:		
Scheduled Start Date:	Scheduled Completion Date:	
Evaluation and Internship Log to be submitted to	Antioch by (date):	
We agree to the above learning plan:		
Student:	Date:	
Evaluator:	Date:	
Student's Academic Advisor:	Date:	

## **Release of Liability**



In exchange for participation in off-campus activities through Antioch University, I hereby release from all liability Antioch University, its employees, agents, and directors.

I acknowledge that Antioch University does not maintain health insurance for me. If I were to be injured in any way through my participation, I acknowledge and agree that I am fully responsible and that Antioch University has no liability or responsibility for my injury.

I have read the foregoing and agree to be bound by it.

Course Number:

Program:

Description of Off-Campus Activity:

Date(s) of Activity:

**Student Printed Name** 

Student ID Number

Student Signature

Date



# BA Internship Log For \_\_\_\_\_

DATE	TIME	SUPERVISOR