New York Institute of Technology

International and Experiential Education

LEARNING AGREEMENT

PART A1 – STUDENT INFORMATION

Student name _____________________________________________________   ID #: _______________ Cell # ____________________

Last   First

Email _______________________________ Major __________________________Graduation (ex. May 2020): _____________________

How did you find this internship/volunteer/shadow position?

☐ International/Experiential Education   ☐ Career Services/Handshake

☐ Networking   ☐ Website: ____________________________   ☐ NYIT professor/staff: ______________________________

PART A2: STUDENT LEARNING

OBJECTIVE(S): What will you accomplish by the end of your internship (see handout for examples)? ______________________________

________________________________________________________________________________________________________________

________________________________________________________________________________________________________________

Select the TOP THREE (3) transferable/civic skills you would like to develop this semester in this internship/volunteer/shadow position:

☐ Critical Thinking / Problem Solving

☐ Adaptability

☐ Written Communication

☐ Verbal Communication

☐ Intercultural Communication

☐ Intergenerational Communication

☐ Technology

☐ Leadership

☐ Organization/Planning

☐ Research

☐ Time Management

☐ Flexibility

I have met with an Experiential Education advisor to discuss learning objectives, safety, ethics, employee citizenship and the ICP itself. I consent to respond in a timely manner to NYIT, attend ICP reflection and complete a student evaluation at the end of the semester:

Student Signature____________________________________________________________  Date___________________________

PART B1 – SUPERVISOR INFORMATION

Company Name ___________________________________________________________________________________________________

Company Address __________________________________ City______________________________ State___________ Zip__________

Supervisor’s Name _________________________________________________________Title ___________________________________

Supervisor’s Phone ________________________________ Email ___________________________________________________________

(to send 2 3-minute online evaluations)

PART B2 – INTERNSHIP/VOLUNTEER POSITION INFORMATION

Internship/Volunteer Position Title _____________________________

*** JOB DESCRIPTION MUST BE ATTACHED***

Start Date (mm/dd/yy): _________________  Estimated End Date (mm/dd/yy): ___________________ Average Hours per Week: ______

Method of Compensation:

☐ Hourly:  $ ______ per hour

☐ Stipend:  $ ______ per ☐mo ☐wk ☐day

☐ Travel Reimbursement:  $ ______ per _______

☐ Other: ____________________________

I have read fully, understand and agree to uphold the requirements of NYIT’s Employer Policy (http://nyit.edu/career_services/for_employers). I am consenting to one site visit by phone or in person, and TWO short online performance evaluations (mid- and end-term):

Supervisor Signature____________________________________________________________  Date___________________________

PART C – INTERNSHIP/PRACTICUM/CAPSTONE COURSE

Course (ex. HSCI 410): ____________________________ Credits: _____ Professor/Instructor: ____________________________