

INTERNSHIP ADVISOR FORM

Student Name: _____ Date: _____
Major: _____ NAU ID: _____
NAU Email Address**: _____ Semester of Internship: _____
Internship Position: _____ Company: _____

GPA: _____ Verified By: _____
(must be at least 2.5)
Advisor: _____ Semester Enrolled: _____

Advisor Signature: _____ Internship Coordinator Signature: _____

1. Internship Course:

___ BBA 408

2. Number of Credits*:

___ 3 (three)

___ 6 (six)

3. Application in Student's Program

___ Part of Emphasis Requirements

___ Used to Fulfill Elective

By signing below, I acknowledge I have read, understood, and will adhere to the Objectives, Policies, and Procedures for the BBA Internship Program.

Student Signature

Date

*Note: A student may take up to 6 units of academic credit for a given internship. However, the first 3 units will apply as part of the student's academic program, if applicable. The other 3 units will be additional business electives only.

** Note: All communication with students during their internship will be conducted via their Blackboard email account. Students must check their Blackboard email accounts during their internship.



WORK AGREEMENT

Student Name _____ NAU ID # _____

Address _____ City _____ State _____ Zip _____

E-mail _____ Home Phone _____ Cell Phone _____

Employer _____ Phone _____

Address _____ City _____ State _____ Zip _____

Immediate Supervisor's Name _____

Title _____ Phone _____ E-mail _____

Student's Position (job title) _____

Work Schedule _____ Employment Dates (from/to) _____

Pay per hour \$ _____ Hours per week _____

Employer

The employer shall provide the opportunity for learning under supervision in accordance with the job description, which is developed and agreed to by all parties. The employer assures that the student will be accepted and assigned to jobs and otherwise treated without regard to race, color, national origin, sex, or handicap. The student will be employed and compensated in conformity with federal, state, and local laws or other agreed upon compensation. The employer will submit two performance evaluations of the student to the Internship Coordinator during the course of the work experience period.

Is the student eligible for unemployment compensation? Yes ___ No ___ fringe benefits? Yes ___ No ___

Student

The student shall perform the work assignment on the job as a professional, devoting time to the duties according to the policies and regulations of the employer. The student will assume the duties assigned as detailed in the job description. The student may help develop the job description. The student will also fulfill the academic component of the program by writing a final report describing, analyzing, and evaluating the work assignment as outlined by the Internship Coordinator.

Internship Coordinator

The Internship Coordinator shall set criteria for legitimate work experience opportunities by making sure that the job is related to the student's field of study. The Internship Coordinator shall maintain ongoing evaluation of the internship through reports and consultation with the student and supervisor and will award credit to the student who registers for and successfully completes the requirements of the work experience.

Student Signature _____
Date

Employer Signature _____
Date

Internship Coordinator Signature _____
Date

NAU is an *Equal Opportunity/ Affirmative Action Institution*