GEORGIA SOUTHERN UNIVERSITY
DEPARTMENT OF INFORMATION TECHNOLOGY
INTERNSHIP AGREEMENT

PURPOSE: To provide the student with the opportunity to gain practical experience in IT.

RESPONSIBILITIES OF Company

The company agrees to supervise the intern's activities, offering help and suggestions for the completion of assignments. The company further agrees to furnish the Department of Information Technology honest evaluations of the intern's performance and capabilities. The company agrees to review midterm and final evaluations with the intern prior to being submitted to the Department of Information Technology.

RESPONSIBILITIES OF THE DEPARTMENT OF INFORMATION TECHNOLOGY:

The Department of Information Technology agrees to be available for consultation about the intern’s performance during the period of the student's internship regarding the learning process. The Department of Information Technology agrees to provide evaluation forms and to accept the company’s evaluation of the intern for degree purposes.

RESPONSIBILITIES OF THE INTERN:

The student intern is expected to cooperate at all times with Company concerning the assignments and commitments of the company, to conduct himself in a professional manner while on or off duty, and to abide by all rules and regulations pertaining to the regular employees of the company.

The intern is expected to work at least *280 HOURS* for completion of the internship requirement.

The intern is expected to submit a final report including the following:

1. A daily or weekly log of activities and significant events.
2. Background profile of the firm/agency.
3. Description of work performed including samples of work outputs such as reports, samples of developed applications, screen-shots of websites, or other documentation.
4. Completion of the Internship Evaluation Form (see below).

The final report will be expected to be well written with good grammar and no spelling errors. Poorly written reports will be returned. More information about the evaluation process is available on the Department of Information Technology’s website at: https://cec.georgiasouthern.edu/it/students/forms/
I, Student am aware that participation in an internship or applied learning experience arranged through the Department of Information Technology may expose me to a risk of property damage and bodily or personal injury, including injury that may prove fatal, to myself or others. I hereby assume any and all such risk. For the sole consideration of the Department of Information Technology arranging for my participation in an internship or applied learning experience at Company, I hereby release and forever discharge Georgia Southern University, the Board of Regents of the University System of Georgia, their members individually and their officers, agents and employees from any and all liability, claims, demands, rights, and causes of action of whatever kind, arising from or by reason of any personal injury, property damage, or the consequences thereof, resulting from or in any way connected with my participation in the above referenced internship or applied learning experience. I understand that acceptance of this signed agreement by the board of Regents of the University System of Georgia shall not constitute a waiver, in whole or in part, of sovereign immunity by said Board, its members, officers, agents, and employees.

I further agree to follow all administrative policies, standards, and practices of the facility. I understand that I shall not be deemed to be employed by, or to be an agent or servant of, the Board of Regents, or Georgia Southern University.

I have read and understand the above agreement and I agree that it binds my heirs, executors, administrators, and assigns, as well as myself. I have freely and voluntarily signed this Agreement.

Signature____________________________ Date____________________________

Student

Print_________________________________

Student Name

Signature____________________________ Date____________________________

Supervisor

Print_________________________________

Supervisor Name

Signature____________________________ Date____________________________

Department of Information Technology
College of Engineering and Computing
Georgia Southern University
PART I: Please rate the intern on each of the following areas:

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<th>Very Weak</th>
<th>Weak</th>
<th>Neutral</th>
<th>Strong</th>
<th>Very Strong</th>
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<tr>
<td>Relations with others</td>
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<td>Attitude</td>
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<td>Attendance &amp; Punctuality</td>
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PART II: Identify three (3) strengths of the intern:


PART III: Identify three (3) areas where the intern need to improve his/her performance:


PART IV: Has evaluation been reviewed with the intern? Yes_____ No_____  
Signature Company: __________________________ Date: __________________________

Signature Intern: __________________________ Date: __________________________

The student is responsible for uploading the completed document through the internship course in folio.

GEORGIA SOUTHERN UNIVERSITY
DEPARTMENT OF INFORMATION TECHNOLOGY
INTERN FINAL EVALUATION FORM

STUDENT NAME:_________________________
SEMESTER/TERM:________________________
COMPANY/ORGANIZATION:________________________
COMPANY/ORGANIZATION INTERN SUPERVISOR:________________________

PART I: Please rate the intern on each of the following areas:

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PART II: Identify three (3) strengths of the intern:

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

PART III: Identify three (3) areas where the intern need to improve his/her performance:

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

PART IV:

Has evaluation been reviewed with the intern? Yes_____ No_____ 
Signature Company: __________________________ Date: __________________________
Signature Intern: __________________________ Date: __________________________

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