



INSTRUCTIONS

Please outline the work experience envisioned for the student's Internship position below.

The employer should keep in mind that the Internship program is intended to have significant academic component. Therefore, in addition to determining work terms and experience, this form outlines the expectations of the student in completing the Internship course work. The Electrical Engineering Technology (EET) Internship Work Proposal Form 1 is to be filled out and signed by both the student and employer supervisor at the beginning of the first working semester. The form should then be returned to the faculty Internship Coordinator in the Department of Engineering Technology.

EXPECTATIONS – STUDENT

The Internship student is expected to complete the internship coursework in a timely manner.

If filing deadlines are missed, the student should immediately make arrangements with the faculty Internship supervisor to complete the work.

The Internship student will receive a grade of "Incomplete" if all of the coursework, as indicated in Form 1, is not completed by the end of the semester. If no attempt is made to make up the coursework, the "Incomplete" will automatically convert to a grade of "F" after one semester. Details about incompletes can be found on the KSU website.

If the coursework is not completed according to the arrangements made between student and Internship instructor, the faculty supervisor will contact the student and also the employer's supervisor and the Engineering Technology Department Chair.

EXPECTATIONS – FACULTY SUPERVISOR

The faculty supervisor will take the lead in facilitating all aspects of the internship course and ensure the assigned work is appropriate and in accordance with approved proposals.

The faculty supervisor will collect all forms and facilitate the review process.

The faculty supervisor will assign a final P/F grade.



Student Name (Please Print): _____

Student Signature: _____

KSU ID: _____

Date: _____

Fall Spring Summer

Dates: _____ to _____
Month, Day, Year Month, Day, Year

Work Experience:

Employer Supervisor: _____ Date: _____

Faculty Advisor: _____ Date: _____

Department Chair: _____ Date: _____