

**ENVIRONMENTAL SCIENCE AND SOCIETY PROGRAM  
COLLEGE OF ARTS AND SCIENCES  
EASTERN MICHIGAN UNIVERSITY  
(CONTRACT SHOULD BE FILLED OUT BY THE STUDENT)  
Internship (ENVI 488) Learning Contract**

Please return to: Thomas Kovacs, ENVI Internship Coordinator, tkovacs@emich.edu

\_\_\_\_\_ Term, 20\_\_\_\_\_

Student Name \_\_\_\_\_ ID \_\_\_\_\_ Phone \_\_\_\_\_

E-mail \_\_\_\_\_

Internship Organization Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

On-Site Supervisor Name \_\_\_\_\_ Phone \_\_\_\_\_

E-mail \_\_\_\_\_ Fax \_\_\_\_\_

Program Advisor Tom Kovacs Phone 734-487-8591

**Specific On-Site Duties.** Please describe in about five sentences or less the specific duties you will fulfill and the level of supervision you will receive.

**Relationship of Internship to ENVI Program Courses and Career Aspirations.** Please describe in about five sentences or less the relationship of the internship experience to your academic experience and career aspirations (be specific about the course content that will be applied to the internship)

**Anticipated Work Schedule.** This should be completed by the student and approved by the on-site supervisor with their signature below. Please include start and end dates and weekly work hours.

Number of Credits 2 [Internship total minimum hours = 150 hours]

**I agree to supervise this student in the work described herein and to supply any information including the Supervisor Evaluation Form (found at [http://www.emich.edu/envi/student\\_resources/internships.php](http://www.emich.edu/envi/student_resources/internships.php)) to aid the instructor's final evaluation of the student.**

Date \_\_\_\_\_ Signature \_\_\_\_\_ Position \_\_\_\_\_  
On-Site Supervisor

**I agree to fulfill the assignment as described above and understand what is required of me, the criteria that will be used for evaluation, and the nature of the grading.**

Date \_\_\_\_\_ Student's Signature \_\_\_\_\_

**I approve this student's placement and agree to evaluate all required submitted materials, and assign the final grade certifying the credit for this field experience.**

Date \_\_\_\_\_ Program Advisor's Signature \_\_\_\_\_