



Kingsborough Community College
Center for Career Development & Experiential Learning
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SD8101: Independent Study - Internship

Learning Agreement

Student _____

Major _____

Local Address _____

Home Phone _____

Student Cell _____

Employer _____

Term _____ Year _____

Employer Address _____

Days/Hours

Mon. _____

Tues. _____

Internship Title _____

Wed. _____

Thur. _____

Fri. _____

KCC Supervisor _____

Total Hours per week: _____

Supervisor (Intern Site) _____

Unpaid

For Pay Hourly Rate: _____

For Stipend Amount: _____

Site Supervisor's Phone Number _____

For Credit Only

Other Compensation

Work Period: From ___/___/___

To ___/___/___

Duties and Responsibilities:

Learning Expectations

(Knowledge or skills that I want to gain)

1. Academic/Technical

a.

b.

c.

2. Organizational

a.

b.

3. Personal

a.

Learning Outcomes/Evaluation methods

(How I will demonstrate that I have reached my expressed Learning expectations)

1. Academic/Technical

a.

b.

c.

2. Organizational

a.

b.

3. Personal

a.

Revision of Learning Contract:

TO THE EMPLOYER/SUPERVISOR: You are encouraged to provide meaningful feedback that will aid the student in meeting the learning objectives specified. When the objectives are, in your opinion, not appropriate to the student's internship experience, you may assist the student in identifying new objectives or revising those stated.

A. Modification or deletion of initially proposed objectives. Please specify:

B. New objectives identified as a result of the student/supervisor discussion. Please specify:

Kingsborough Community College Supervisor:

I agree with all components of this Learning Contract, having discussed the learning contract with the student and provided appropriate recommendations. In my judgment, the student is adequately prepared to meet the terms of the contract, and I agree to work with the student to ensure that objectives, strategies, and learning outcomes of the internship are carried out.

I agree to see that all parties are aware of their responsibilities and obligations while participating in the internship experience. I agree to constantly strive to improve the program by seeking suggestions from all parties.

I understand that if the student is required to be on-site, I must provide documentation with COVID-19 risk mitigation protocols.

Student:

I agree with all components of this Learning Contract, will work towards the objectives, pursue the strategies, and complete the outcome measures to the best of my ability. I will keep the KCC Supervisor informed about my job, and turn in my time sheet reports each week. I understand my attendance is taken from my weekly time sheets and that late weekly reports can result in those days being counted as unexcused absences. I will give my employer as much advance notice as possible if I am unable to report for work, or if I cannot report to work on time.

I will comply with a reasonable request, order or recommendation that my employer gives me, as long as I am not asked to do something that is dangerous or illegal. As a representative of Kingsborough Community College, I realize my conduct is a reflection upon the entire Kingsborough Community and fulfilling the above obligations will be an important part of my training. I will adhere to the organizational rules, procedures and policies including the confidentiality of the organization and client information. I understand this experience is to be supervised by the KCC Supervisor and will be under the direct supervision of an authorized employee of the company. I understand that I must provide my own transportation to and from work and that Kingsborough Community College and the employer are in no way responsible for any incidents or accidents that may occur while I am going to or from the internship site.

I agree to allow Kingsborough Community College to disclose my student educational records as it relates to the internship to the Site Supervisor/Employer, including disciplinary records, status of enrollment at the College, and attendance and participation in the internship program, for the purpose of informing the site supervisor of my eligibility and participation in the internship program.

In signing this Agreement, I acknowledge that I understand that my participation in an in-person internship will involve risks and hazards not found in remote study at the College, which is the current mode of instruction required by the COVID-19 pandemic and the executive orders and directives of New York State. In ordinary times, these risks can range from a) minor injuries and illness such as bruises, and strains, to b) major injuries and illness such as broken limbs, loss of sight, neck or back injuries, heart attacks, and concussions, to c) catastrophic injuries, including paralysis and death, and also include risks of damage to or theft of personal property, and risks involved in traveling to and within, and returning from, internship sites. I understand that COVID-19 presents unique health risks, especially to those with underlying conditions, and that there may be other risks not known or reasonably foreseeable. I have sought and obtained information and advice that I feel are necessary and appropriate. I **VOLUNTARILY ACCEPT AND ASSUME ALL OF THE RISKS IN PARTICIPATING IN THE INTERNSHIP** and my participation in an internship with internship partner is voluntary.

Any violations of this agreement may result in a failing or incomplete grade in the course and/or disciplinary action, and you will be responsible for any and all tuition costs in accordance with the College's tuition policy.

Site Supervisor:

I have read this Learning Agreement, and attest that its components meet the standards and expectations for an internship with my organization. My organization shall be solely responsible for the decision to hire the student. I agree that this internship experience will comply with all state, federal, and local labor laws. I agree to provide the student with any of my organization's policies and procedures to which the student is expected to adhere during his/her internship and while on my organization's premises.

I agree to review the student's job progress with him or her each week and sign the weekly time sheet report. I agree to provide periodic appraisals of the student's performance on forms provided by the KCC Supervisor. I agree to use the best professional efforts to provide the experiences contemplated by this Agreement

I agree that joint conferences will be held whenever two more parties feel it may be beneficial and for the following specific reasons:

- o To periodically review student's job progress;
- o To discuss misunderstandings; and
- o To discuss reasons for termination of placement.

I understand that for on-site internships, documentation must be provided of COVID-19 risk mitigation protocols to Kingsborough Community College, prior to the student's start date. If documentation or protocols do not appear to comply with NYS standards, the student's internship plan must be revised to avoid on-site work.

CIVIL RIGHTS STATEMENT: Cooperating site supervisor/employer agrees that the student will be accepted and assigned jobs and otherwise treated without regard to race, color, national or ethnic origin, religion, age, sex, sexual orientation, gender identity, marital status, disability, genetic predisposition or carrier status, alienage, citizenship, military or veteran status, or status as victim of domestic violence.

We, the undersigned, agree to the terms and statement contained in this agreement.

KCC Supervisor Signature: _____

Print/Type KCC Supervisor Name _____

Email: _____

Date: _____

Student Signature _____

Print/Type Student Name _____

Email: _____

Date: _____

Site Supervisor Signature: _____

Print/Type Site Supervisor Name: _____

Email: _____

Date: _____