Academic Internship Information and Guidelines
The primary goal of an internship is to assist the student in applying concepts and skills acquired in his or her academic program to the work situation, to acquire job related competencies not available within the university environment and to gain work experiences through the relationships and responsibilities encountered on the job.

Eligibility
1. The student must be in good academic standing and have completed at least one semester at UC Merced. Advanced standing is preferred.
2. The student must be enrolled at the time of the internship. For summer internships, students must enroll in summer session.
3. The student should have sufficient academic background to undertake the internship. In cases of internships taken towards the academic major, students should have completed at least one upper division courses in the area or other work as required by the faculty sponsor.

Guidelines
1. Academic credit is granted as a 195 or 199 course with variable units; depending on the type of internship. 195 can only be used if research is being conducted. The value is determined by the number of hours worked during a semester:
   - 1 unit=3 hours per week
   - 2 units= 6 hours per week
   - 3 units= 9 hours per week
   - 4 units= 12 hours per week
2. Course is offered as P/NP grading option only; unless letter grade is required for major requirement.

Application Timelines
As internship proposals should be given a great deal of thought and consideration, planning should begin well before the registration period for the semester in which the internship will be performed. A student can only register for an internship with approval of the faculty sponsor and the Office of the Dean.

**End of WEEK 1 of instruction**
Academic proposal and Learning Contract **and** Independent Study Form, signed by student and faculty sponsor, NS Advising (SE 370) and then submitted to the Career Services Office for final signatures.

**Throughout semester**
Students completes hours and maintains contact with faculty sponsor as required.

**Last week of instruction**
Student submits all materials to the faculty sponsor for grading. Student completes internship evaluation as required by Career Services. Faculty submits final grade and completes internship evaluations as required by Career Services.

OFFICE USE ONLY:
Independent Study form submitted on: _________________________ By: _____________________
Student Name: _________________________________    UCM ID#: ___________________
Student Email: _________________________________    Faculty Sponsor: ______________
Student Major/Minor: ____________________________   Class Level: ______________
Semester Internship Undertaken: ____________________    Hours per week: __________
Start date: ___/___/___   End date:___/___/___   Is this position paid? ______
Internship Site: ____________________________________________________________________
Site Supervisor: _________________________________________ Phone: _____________________
Address: ________________________________________________________________________

**Student and Site Supervisor to Complete**

*Position Description:*

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OFFICE USE ONLY:

Independent Study form submitted on: _________________________ By: _____________________
Academic Internship Learning Agreement
To be completed by student and faculty member prior to the beginning of the internship experience.

<table>
<thead>
<tr>
<th>Learning Objective/Outcome (What I intend to learn)</th>
<th>Strategies (How objective/outcome will be achieved)</th>
<th>Evaluation Methods (How my progress for each objective will be measured)</th>
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**Faculty to Complete**
Means of evaluation for final grade: List below the journal, readings, projects and/or papers which will be required. Include a due date for each assignment. These assignments must be agreed upon between the student and faculty.

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<tr>
<th>Assignment</th>
<th>Due Date</th>
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Does faculty sponsor plan to do a site visit? ______________

Faculty signature: ________________________________ Date: _______________________

Student signature: ________________________________ Date: _______________________

Supervisor signature: ______________________________ Date: _______________________

NS Advising Designee: _____________________________ Date: _______________________

Career Services Designee: _______________________ Date: _______________________

OFFICE USE ONLY:
Independent Study form submitted on: _______________________ By: ___________________