# INTERNSHIP WORK PROPOSAL FORM

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 Mechanical Engineering Technology (MET) 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.

*We ask that the items presented to the employer supervisor be signed off within a week after the supervisor receives them. If this isn't feasible, another company representative should be designated.*

# MET 3398 Internship Work Proposal Form 1

**This form should be completed and signed by student, employer supervisor, faculty advisor, and Dept. Chair. Completed the term *before* the internship begins.**

Student Name (Please Print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

KSU ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Proposed Work Assignment:**

 Fall  Spring  Summer Dates: \_\_\_\_\_\_\_\_\_\_\_\_\_\_to\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Month, Day, Year Month, Day, Year

Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Describe Planned Job Description/Task for this Internship in space below or attach separate sheet:



**Please Sign and Date Below:**

Employer Supervisor: Date: Faculty Advisor: ­­­­­­­Date: Department Chair: Date: